A CATALOG OF DEPARTMENT OF DEFENSE MEDICAL MODELS AND SIMULATIONS

Version 2

Compiled and edited by Eleanor D. Gauker

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EXECUTIVE SUMMARY

Problem

Information about Department of Defense medical models and simulations is available from many different sources. The Internet, in particular, is a rich source of data, but searching the Web can be time-consuming. Although information is available, it is often difficult to locate, and, once found, is often outdated. The Joint Services Medical Readiness Modeling & Simulation Advisory Group (JSMRSAG) recognized this problem early in 1997, and in conjunction with the Naval Health Research Center (NHRC), compiled the Catalog of Department of Defense Medical Models and Simulations. That document was distributed on both the JSMRSAG and NHRC Web pages, as well as in hard copy and on disk. The initial effort alleviated the problem of finding the information; now, a year later, that information must be updated.

Objective

The goal of the present effort is to update the Catalog of Department of Defense Medical Models and Simulations that was compiled in 1997.

Approach

The Point of Contact (POC) for each project listed in the Catalog was contacted to determine if any changes had occurred. The original information was forwarded to the POC by e-mail or Fax, and the POC returned the information with appropriate updates. Extensive Internet searches also provided data.

Conclusions

Version 1 of the Catalog of Department of Defense Medical Models and Simulations provided a centralized location for information about these specialized projects. Version 2, in the interest of responsible Internet communication, proposes to keep this information current by providing timely updates of Modeling and Simulation (M&S) projects.

CATALOG OF DEPARTMENT OF DEFENSE MEDICAL MODELS AND SIMULATIONS Version 2

Introduction

Modeling and simulation (M&S) is a growing field with many applications. The words "model" and "simulation" often are used interchangeably, but in fact, their definitions differ. According to the Department of Defense Directive Number 5000.59 of January 4, 1994 (DoDD 5000.59), a model is defined as "a physical, mathematical, or otherwise logical representation of a system, entity, phenomenon, or process." DoDD 5000.59 defines a simulation as "a method for implementing a model over time. Also, a technique for testing, analysis, or training in which real-world systems are used, or where real-world and conceptual systems are reproduced by a model." Models and simulations are used to predict, to teach, to train, to plan, and to demonstrate, to name just a few of their applications. M&S applications range in complexity from text-based output to virtual reality simulations.

A cursory search for M&S projects on the Internet yields more than forty home pages in the military alone. Most of the indexed military M&S applications are simulations of operational situations involving equipment such as cockpits, weapons, tanks, and other hardware. Information about *medical* M&S projects is more difficult to find. The military medical community has developed numerous models and simulations, but often these projects are listed as sub-topics, or are indexed by title. Therefore, researchers are caught in a tautology: in order to *find* information about DoD medical models and simulations, they need to *have* information such as the name of the project, the point of contact, or the developer.

As models and simulations become increasingly important to the DoD medical community for use in resource planning, casualty estimation, and patient care, it is desirable to develop a resource for current information about them. This project has been undertaken to locate and catalog DoD medical models and simulations with capabilities ranging from casualty estimation to medical logistics planning to simulations of patient encounters. The goal is to collect this specialized information, place it into a single source, and simplify access to it.

Version 1 Review

The initial catalog evolved from three main sources. A draft catalog of medical models and simulations compiled by the Henry Jackson Foundation provided a comprehensive list of existing projects. The Army Medical Department Center & School at Fort Sam Houston also produced a catalog of computer models that yielded several additional projects, as well as the data form used in this project. Other entries came from the Internet. The data from these sources was often taken verbatim; when this occurred, the specific source was given at the bottom of the page for that entry. If the Internet was the source, the Internet address was provided.

The Internet search became, in effect, a sub-study. Forty-three sites of interest to DoD medical researchers were found. Examples included a glossary of military terms, various search engines, a "white pages" list of M&S personnel, various publications, calendars of M&S demonstrations and meetings, and M&S home pages for each branch of the DoD as well as the Joint Chiefs. The addresses of these Web sites were displayed in Appendix A.

The Catalog of Department of Defense Medical Models and Simulations, an alphabetical listing of 53 individual medical M&S projects, comprised Appendix B. The document was distributed by Internet on both the NHRC and the JSMRSAG Web sites. In addition, JSMRSAG distributed a limited number of hard copies of the Catalog, with an accompanying disk that could be used to perform electronic searches.

Version 2

The Points of Contact (POCs) were asked to provide updated information about their projects. If an initial contact and several follow-up communications yielded no results, an Internet search was used to find the current status of the projects. These findings, in the form of the Catalog of Department of Defense Medical Models and Simulations, appear in Appendix B.

Appendix A contains links to other DoD sites. The links in Version 1 quickly became outdated because the Internet changes so rapidly. Therefore, this list has been abbreviated to include only major links.

Version 2 will be distributed through the Internet. Because it is an NHRC Technical Document, it will appear on the Error! Bookmark not defined. Web Page. The Error! Bookmark not defined. Web Page will also publish the Catalog. There will be no hard copy available for distribution; however, the document can be downloaded from the Web.

Updates will be made as they are received. To make changes to a current project, or to add a new one, contact Eleanor Gauker by e-mail at **Error! Bookmark not defined.**, or by phone at (619) 553-8412, DSN 553-8412.

Summary

The need for a specialized catalog of DoD medical models and simulations becomes evident when one attempts to uncover information on this topic without the benefit of having personal contacts in a professional network. The information is *there*, but it is very difficult to discover *where*, because it is scattered among various sources.

When searching the Internet, one quickly learns that a great deal of the information found there is outdated; however, organized, well-maintained sites are useful resources. So that this catalog continues to be a timely resource, points-of-contact may provide updated information or additional projects at any time. In addition, it will be necessary to actively pursue updates to the information for each project at least on a yearly basis to keep up with changes in the field of medical modeling and simulation.

APPENDIX A

Useful Internet Sites

Internet Sites

The Federal Web Locator	Error! Bookmark not defined.
Naval Web Sites	Error! Bookmark not defined.
BuMed	Error! Bookmark not defined.
Surgeon General	Error! Bookmark not defined.
Naval Research Lab	Error! Bookmark not defined.
Virtual Naval Hospital	Error! Bookmark not defined.
Marine Corps	Error! Bookmark not defined.
Army Home Page	Error! Bookmark not defined.
JSMRSAG	Error! Bookmark not defined.
Defense Link	Error! Bookmark not defined.
Joint Chiefs	Error! Bookmark not defined.
DARPA	Error! Bookmark not defined.
Health Affairs	Error! Bookmark not defined.
M&S Resource Repository	Error! Bookmark not defined.
Joint Warfighting Center	Error! Bookmark not defined.
Army M&S Catalog (WWW Version)	Error! Bookmark not defined.
Army M&S Catalog (AMSCAT)	Error! Bookmark not defined.
Army Research Institute for Environmental Medicine	Error! Bookmark not defined.
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M&S Website Directory	ERROR! BOOKMARK NOT DEFINED.

APPENDIX B A CATALOG OF DEPARTMENT OF DEFENSE MEDICAL MODELS AND SIMULATIONS

Version 2

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LPXMED - External Logistics Processor, Medical Module		
**		

PROJECTS LISTED BY BRANCH OF SERVICE

Air Force

APSE Automated Patient Stream Estimator

CASE Casualty Stream Estimator (CaSE)
CHAS Chemical Hazard Assessment System

CWTSAR Chemical Warfare Theater Simulation of Air Base Resources

HQ AMC AE MEDTRAN

MRPF

MRSD Medical Readiness Support Database

NET EDIT Network Edit

SMRTS Standardized Medical Readiness System (SMRTS)

THREAT Threat Related Attrition System

UTC (Unit Type Code) Validation Mode

Army

AURA Army Unit Resiliency Analysis

BBS Brigade/Battalion Battle Simulation

CASRED Casualty Reduction Analysis CASSTRAT Casualty Stratification Model

CBS Corps Battle Simulation, Version 1.5.4

CEM Concepts Evaluation Model COSAGE Combat Sample Generator

CSSTSS Combat Service Support Training Simulation System 1.5

FASTALS

FST Forward Surgical Team (FST) Simulation

GREWMS Global Requirements Estimator for Wartime Medical Support

HCM Healthcare Complex Model

JANUS

MEDEVAC Medical Evacuation Simulation

MOBCEM Mobilization Capabilities Evaluation Model

PATGEN Patient Workload Generator

PFM Patient Flow Model
TRANSMO Transportation Model
VIC Vector In Commander

Marines

CASEST Casualty Estimation Model

Navy

AIMM Automated Interactive Medical Multimedia

FORECAS

MARC-ES

NHRC MAT

OPTEVAC

SHIPCAS

SHIPDAM Ship Damage Model

Other Department of Defense

JCATS Joint Conflict & Tactical Simulation Joint Warfighting Center

JOPES Joint Operation Planning & Execution System Defense Systems Support Organization

LPXMED External Logistics Processor, Medical Module Joint Staff/J4-Medical Readiness Division

MAT Medical Analysis Tool Joint Staff/J4-Medical Readiness Division

MEDISIM Simulated Medical Corpsmen for Medical Forces Planning and Training

DARPA

MERLIN Medical Readiness Learning Initiative OASD/HA & OASD/RA

ORCA Operational Requirements-based Casualty Assessment Software System

JTCG/ME&AS

NAME OF MODEL: AIMM-AUDIOVISUAL INTERACTIVE MEDICAL MULTI-MEDIA

STATUS:	Operational
PROPONENT:	Bureau of Medicine & Surgery (BUMED)
DEVELOPER:	Naval School of Health Sciences8901 Wisconsin Ave., Bldg 141, Room 120Bethesda MD 20889-5611
POINT OF CONTACT:	 Judith A. Goldman, AIMM Head Phone: DSN 295-5594; COM (301) 295-5594 FAX: DSN 295-6019; COM (301) 295-6019 E-mail: Error! Bookmark not defined.
PURPOSE:	ADL for Navy and Tri-Service medical personnel
GENERAL DESCRIPTION:	Interactive MULTIMEDIA training for medical topics
FILE INPUT:	• N/A
USER INPUT:	Mouse and keyboard & WWW
OUTPUT:	• Interactive MULTIMEDIA training programs including full- screen 30 fps motion video and stereo audio.
MODEL LIMITATIONS:	• None
HARDWARE:	• Systems described at Error! Bookmark not defined When DVD-ROM programs are distributed, multimedia computer specifications will be described at Error! Bookmark not defined.
SOFTWARE:	Multimedia training programs, on CD-ROM, DVD-ROM, videodisc, and the World Wide Web.
DOCUMENTATION:	 Distributed Disks contain complete documentation. Web site, Error! Bookmark not defined. Visual Information Manager's Guidebook
VALIDATION & VERIFICATION	Conducted at program conclusion
TIME REQUIREMENTS:	• 15 to 30 minute segments contained on one to ten hours disks.
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	Varies according to site from constant to infrequent. Systems are distributed worldwide.
PRINCIPAL USERS:	Deployable Medical Forces, hospital corps first responders, etc.

MISCELLANEOUS:	 Current courseware includes: "Management of Chemical Warfare Injuries" (084039) "ACTLS" Malaria Derm Psy Tech Future courseware includes: "Biological Warfare Injury Management: Cardiac Catheterization" (804796)
KEYWORDS:	 Navy, interactive multimedia, CD-ROM, DVD-ROM, simulation, medical, health care
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: AUTOMATED PATIENT STREAM ESTIMATOR (APSE)

NAME OF MODEL.	
STATUS:	Development completed.
PROPONENT:	USAF Surgeon General Office
	Directorate, Medical Readiness Doctrine & Planning
DEVELOPER:	Human Systems Center, Human Systems Program Office,
	Medical Information & Simulation Systems Division (YAI)
POINT OF CONTACT:	• Col Sarah Wright, (301) 619-7503
PURPOSE:	APSE is used to generate representative air base attack
TORIOSE.	casualty streams based on wartime environments to allow
	evaluation of wartime medical systems and assemblages.
GENERAL	APSE is a software program that generates casualty streams
DESCRIPTION:	based on a specific scenario and wounded in action rates.
FILE INPUT:	Default Population Histogram
FILE INFOT:	Patient Condition Mapping
·	Default Wartime Disease Non-battle Injury (DNBI)
	Multipliers
	Battle Injury Histogram
	Major ICD-9 Histogram
	Minor ICD-9 Histogram
	Slight DNBI Deployable Medical System (DEPMEDS)
	Patient Condition (PC) Histogram
	Battle Reaction Stress (BRS) Histogram
USER INPUT:	Run Identification Data
	Scenario Data
	Wounded in Action Rates
	Travel Freeze Time
OUTPUT:	Patient Stream File
	Attack File
	Documentation File
MODEL LIMITATIONS:	Battle Injury Casualties limited to those resulting from Air
	Delivered Conventional Weapons
	Maximum Population at Risk Limited to 8,000
	Casualty Streams limited to DEPMEDS PCs
HARDWARE:	• 486DX/33 or higher
	• 500 Kbytes, minimum
	• 3.5", 1.44 MB
SOFTWARE:	Microsoft Disk Operating System 6.2
DOCUMENTATION:	APSE Reference Manual, including User's Instructions and
	code listing
VALIDATION &	No formal Validation or Verification has been accomplished.
VERIFICATION	
	L company of the comp

TIME REQUIREMENTS:	As required.
SECURITY CLASSIFICATION:	Unclassified, but certain databases may be classified.
FREQUENCY OF USE:	As required
PRINCIPAL USERS:	HQ USAF/SGXR, WAR-MED Planning Systems Office
MISCELLANEOUS:	
KEYWORDS:	War-Med, Air Force, casualty streams, analysis, planning, modeling
SOURCE OF INFORMATION:	HQ USAF/SGXR, WAR-MED Planning Systems Office

accomplishment which make it applicable for use in resource planning. As an operations support tool, the model has been used to generate casualty assessments in support of field operations. The model has also been used to provide information for field training exercises to drive Th. synchronization of replacement support decisions.

NAME OF MODEL: AURA-ARMY UNIT RESILIENCY ANALYSIS

STATUS:	Operational
PROPONENT:	 Director, US Army Research Laboratory, ATTN.: AM&SRL-SL-CM, Chemical, Biological, Nuclear, and Environmental Effects Division, Aberdeen Proving Ground, MD 21005-5066. Error! Bookmark not defined.
DEVELOPER:	 US Army Ballistic Research Laboratory, Aberdeen Proving Ground, MD 21005-5066
POINT OF CONTACT:	 Matthew B. Kaufman, COM (410) 671-3958, DSN 584-3958, e-mail: Error! Bookmark not defined.
PURPOSE:	• The AURA model may be used both as a research and evaluation tool and an operation support tool. Its primary outputs consists of personnel and unit equipment losses, identification of weak links within the unit structure, and unit effectiveness. As a research and evaluation tool it has been used extensively to study the effectiveness of weapon systems against targets and could be applied to the problem of assessing the most effective mix of munitions types against particular targets. It has also been used as a tool to assess the impact of TO&E force structure changes on a unit effectiveness. It provides the flexibility to model the effects of cross-training and the various methods of task

GENERAL	AURA is a one-sided, fully automated, event-sequenced
DESCRIPTION:	model. Quantification begins with the definition of
DESCRIPTION:	capabilities needed for a unit mission. These capabilities are
	vested in the various personnel and equipment with full, user-
	definable, multi-capable elements allowed. Personnel and
	equipment are deployed including identification of nuclear as
	well as conventional posture. Weapons are employed using
	Monte Carlo techniques to portray target location errors.
	Casualties and damage are assessed for both nuclear and
	conventional threats using current techniques. Then, at
	realistic times during the engagement, the unit assets are
	reallocated and redeployed to optimize mission performance
	capability. Options include a comprehensive, asset
	competitive repair/return-to service capability, reliability,
	dynamic posture changes, and secondary casualty effects.
	Domain: land
	Span: Local
	Mission areas represented: indirect artillery, bombs, rockets,
	missiles, and smart munitions.
	Level of detail: Individual soldiers and equipment
FILE INPUT:	Standard and alternate mission performance procedures;
	Unit composition and deployment;
	Elemental capabilities; degradations and repair
	Threat (acquisition, warhead delivery, warhead types);
	Vulnerability/lethality information
USER INPUT:	Time-step and event-step; progresses through events at user-
	specified times.
OUTPUT:	Effectiveness vs. time
	Weak link (limiting capability) analysis
	Casualty/damage reports
	Operating procedure reports
MODEL LIMITATIONS:	M. Smith, "Review and Recommendations of AURA for
WODEL LIMITATIONS.	CORPSAM," US Army Research Laboratory, April 1997
	(DRAFT).
	M. Kaufman, ARL-TR-1404, "Nuclear, Biological, and
	Chemical Contamination Survivability (nBCCS): Reliability,
	Availability, and Maintainability (RAM) - The Forgotten
	Casualties of War," US Army Research Laboratory, June
	1997.
HARDWARE:	Mainframe: CDC, DEC, VAX, IBM, and CRAY
HARDWAKE:	RAM/Disk storage: 12 MB
	• Printer
SOFTWADE.	C++ programming language
SOFTWARE:	Ly Branning range

DOCUMENTATION:	 Executive Summary: BRL-MR-3892 User manual: BRL-TR-3187 Programmer manual: Vol 1-BRL-TR-3156, Vol 2-BRL-TR-3103
VALIDATION & VERIFICATION	not specified
TIME REQUIREMENTS:	Running time not specifiedTime to prepare: 3 man-months
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	Upon request
PRINCIPAL USERS:	Army Research Laboratory SAIC TRAC-WSMR TRAC- FLVN
MISCELLANEOUS:	 Model output supports chemical casualty estimates for the TRADOC Decision Support System and field manuals. Has been examined for linkage to FORCEM and VIC.
KEYWORDS:	Personnel losses; Equipment losses; Chemical casualty estimates
SOURCE OF INFORMATION:	Matthew B. Kaufman, COM (410) 671-3958, DSN 584-3958, e-mail: Error! Bookmark not defined.

NAME OF MODEL: BBS-Brigade/Battalion Battle Simulation

	T
STATUS:	Operational
PROPONENT:	Director, Combined Arms Command-Training
	National Simulation Center
	Fort Leavenworth KS 66037-7301
DEVELOPER:	National Simulation Center
POINT OF CONTACT:	 POC: LTC Loughhead, Tactical Division Chief, DSN
	552-8132; Comm (913) 684-8132; Fax (913) 684-8137;
	E-Mail <u>loughhej@leav-emh.army.mil</u> .
PURPOSE:	BBS provides battalion and brigade commanders and their
	staffs with an environment in which to train for the execution
	of AIRLAND battle doctrine at the tactical level of war. BBS
	is used primarily as a Command Post Exercise (CPX) driver.
GENERAL	Two-sided, free play, real-time environment
DESCRIPTION:	Plays air and ground warfare between opposing units and the
	resupply, medical, and maintenance needed to support the
	conflict.
	High resolution Depresents avecage and support system at the item level.
	 Represents weapon and support system at the item level. Terrain databases, loaded to hard drive by CD
FILE INPUT:	 Terrain databases, loaded to hard drive by CD Unit-dependent scenarios/unit databases.
	Movement/conflict orders
USER INPUT:	Unit names and locations
	Resupply
OUTPUT:	Conflict resolution
OUTPUT:	Battle damage
	Personnel and logistics losses
	Alerts, reports, graphic battle description
MODEL LIMITATIONS:	Limited to play terrain types available as digitized data with
WODEL BINITITIONS.	video disk display
	Can only model up to 750 units (red and blue inclusive)
HARDWARE:	Computer system: Digital Equipment VAX/VM&S
	RAM/disk storage: 32 Meg Ram/5 hard drives 426 megs
	each/5 external hard drives 426 each
SOFTWARE:	MODULA-2
DOCUMENTATION:	Executive Summary
	User Manual: Warfighters Guide & Commanders Planning
	Guide
	Programmer Manual: Database Managers Guide and System
	Managers Guide

VALIDATION & VERIFICATION	 Verification proponents: National Simulation Center (NSC), Communications and Electronics Command (CECOM). Simulation Training and Instrumentation Command (STRICOM) Validation proponents: NSC, CECOM, STRICOM Configuration management proponents: NSC, CECOM, STRICOM V & V performed: Software/hardware
TIME REQUIREMENTS:	3 weeks to prepare databases & scenarios
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	Battalion and Brigade Command and Staff
MISCELLANEOUS:	Can now create terrain areas in a few weeks given the appropriate ADRG map data by NIMA, or the organization requesting exercise support.
KEYWORDS:	Model, battalion, brigade, simulation
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: CASUALTY STREAM ESTIMATOR (CASE)

NAME OF MODEL.	CASCALIT BIRLANI ESTIMATION (CIRCL)
STATUS:	Under Development
PROPONENT:	USAF Surgeon General Office
	Directorate, Medical Readiness Doctrine & Planning
DEVELOPER:	USAF Surgeon General Office
	Directorate, Medical Readiness Doctrine & Planning
POINT OF CONTACT:	Col Sarah Wright, COM (301) 619-7503; DSN 343-7503
PURPOSE:	The Model generates theater (local and evac-in) casualty
TOR OSZ.	stream.
GENERAL	The Model produces reports that contain Time of Arrival,
DESCRIPTION:	Time of Injury, Time of Last Care, Patient Identification,
	DEPMEDS Patient Condition, Number of casualties, Type of
	Casualty (BI, NBI, DIS, BS), Evac Transportation, Last Level
	of Care, Patient Location Coordinates.
FILE INPUT:	DEPMEDS Patient Conditions Data
	Major Type Cluster Data (BI, NBI, DIS, BS)
	PC Frequency Distribution
	Survival Curve Data
	Major ICD-9 Code Histogram
	Minor ICD-9 Code Histogram
USER INPUT:	PAR (Population-at-Risk) Data
	Population Distribution Parameters
	BI, NIB, IDS, BS Rates per 1000
	Conflict Intensity Period Data
	Distance, speed, and location parameters
OUTPUT:	Casualty Streams Report
MODEL LIMITATIONS:	None
HARDWARE:	IBM compatible PC Pentium
	Minimum of 8 MB RAM
	75 MHz processor clock frequency
	Minimum 20 MB disk space (more required for user data)
SOFTWARE:	• C/C++
	Windows 95
DOCUMENTATION:	Completed.
VALIDATION &	• TBA
VERIFICATION	
TIME REQUIREMENTS:	Minimal time to prepare scenarios (30 minutes)
SECURITY	Unclassified, but some databases may be classified
CLASSIFICATION:	
FREQUENCY OF USE:	On demand
FREQUENCY OF USE:	

PRINCIPAL USERS:	HQ USAF/SGXR WAR-MED PSO
MISCELLANEOUS:	Operates Independently.
KEYWORDS:	 Casualty, Scenario, PAR, C++, Analytical, Model, Frequency, Distribution, Probability, Statistics
SOURCE OF INFORMATION:	WAR-MED PSO, Fort Detrick, MD

NAME OF MODEL: CASEST

STATUS:	Operational
PROPONENT:	Headquarters, U.S. Marine Corps. Code MPP-60
DEVELOPER:	IDEAMATICS, Inc.
POINT OF CONTACT:	 MAJ Max Waugh, COM (703)-614-1358, e-mail: mwaugh@notes.hqi.usmc.mil Dr. David L. Danner, COM (703) 903-4972, e-mail: Error! Bookmark not defined.
PURPOSE:	 To provide manpower planners with estimates of scenario-based battlefield casualties To stratify estimated casualties by type casualty, by period, and by grade and military occupational specialty
GENERAL DESCRIPTION:	 CASEST is a deterministic model for projecting total casualties and personnel replacements at an operational level of detail. Estimates address DNBI, Nuclear, Chemical/Biological and conventional casualties. Estimates segregate casualties by combat element (ground, aviation, and combat service support).
FILE INPUT:	Billet information on deployed unitsCasualty rate database
USER INPUT:	 Scenario-specific factors describing combat operations including forces at risk, combat intensity, geographical area, medical evacuation policy, aircraft sortie rates and weapons lethality.
OUTPUT:	Tabular reports of estimated casualties by casualty type and by date, time, phase, force deployed or in total.
MODEL LIMITATIONS:	• Estimates casualaties for conventional and NBC warfare scenarios, but is not currently calibrated for Operations Other Than War.
HARDWARE:	 Computer: IBM compatible 286+ Storage: 500 KB RAM, 1.5 MB disk
SOFTWARE:	Clipper compiled dBase
DOCUMENTATION:	User Reference Manual
VALIDATION & VERIFICATION	Marine Corps Command Development Center Study, 11/91
TIME REQUIREMENTS:	10 days of simulation per second.
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	On demand

PRINCIPAL USERS:	CMC, Code MPP
	USMC force commanders
MISCELLANEOUS:	Model is executed during operation of USMC Manpower
	Mobilization Assignment System
KEYWORDS:	Casualty projection, WIA, KIA, DNBI, casualty rates,
RET WORLDS.	USMC, DOW, replacements
SOURCE OF	Danner, D.L., Casualty Estimation (CASEST) Model User
INFORMATION:	Reference Manual, IDEAMATICS, Inc., McLean, VA,
III OILIIIIIIII	December 31, 1997, Version 3.3.

NAME OF MODEL: CASRED - CASUALTY REDUCTION ANALYSIS

STATUS:	Operational
PROPONENT:	US Army Materiel Systems Analysis Activity
	Aberdeen Proving Ground, MD 21005-5071
DEVELOPER:	US Army Materiel Systems Analysis Activity
POINT OF CONTACT:	• Mr. Stanley C. Butler, COM (410)278-3175; DSN 298-3175
PURPOSE:	 This model can be used either by munitions designers or by designers of armor and helmet protection for soldiers.
GENERAL	CASRED models either a bullet, or fragments from an
DESCRIPTION:	infantry munitions, to determine the extent to which they
	penetrate the target soldier's armor, helmet, or uniform and produce specified types of casualties.
FILE INPUT:	Fragmentation data exist for a number of munitions.
THE IN CT.	Presented area tables for standing and prone targets
	Casualty criteria
USER INPUT:	Human participation: this is a closed, physical model.
OUTPUT:	Summaries of fragmentation data
	Lethal area values by casualty criterion and body part
	Probability-of-kill (pk) as function of range
	Pk by body part and for entire body
,	Pk as grid for input to stochastic models such as fbar
MODEL LIMITATIONS:	Physical space is limited by the farthest range at which
NIODED EXIMITE TOTAL	fragments from the burst have enough remaining velocity to
	produce casualties.
HARDWARE:	Computer: 486/33 PC
	RAM/Disk storage: 8 MB RAM, 200 MB storage
SOFTWARE:	Fortran
DOCUMENTATION:	User Manual includes model description, Input Guide, and
	Guide to Output Options. Available from POC.
VALIDATION &	Not provided
VERIFICATION	
TIME REQUIREMENTS:	Preparation of fragment data for actual munitions requires arena testing
	 Preparation of target presented area tables for new desired
	postures requires photography and measurement.
	 Preparation of casualty criteria for new subdivisions of body
	parts requires expert medical opinion
	Parts requires expert measure opinion

SECURITY CLASSIFICATION:	 Source code & documentation: Unclassified Some fragmentation data may be confidential or secret
FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	Army Materiel CommandVendors for product evaluation
MISCELLANEOUS:	 In process of phase-out; working to confer same capabilities on the Joint Technical Coordinating Group(JTCG) project " Mean Area of Effectiveness Against Personnel Targets."
KEYWORDS:	Casualty, fragmentation, model, simulation
SOURCE OF INFORMATION:	Error! Bookmark not defined

NAME OF MODEL: CASUALTY STRATIFICATION MODEL

NAME OF MODEL.	
STATUS:	Operational
PROPONENT:	US Army Concepts Analysis Agency
DEVELOPER:	US Army Concepts Analysis Agency
POINT OF CONTACT:	 Stanley Miller COM (301) 295-5292; DSN 295-5292
PURPOSE:	This model is a computerized, deterministic model which provides a means of predicting, by skill category and grade, the casualties from a war scenario.
GENERAL DESCRIPTION:	• This one-sided, deterministic model deals primarily with forces at a theater level. Its primary function is to take a statement of aggregate casualties on a time-phased basis, usually 210-day increments, and stratify or disaggregate those casualties into MOS/grade levels, also time-phasedTheater level campaign simulations generate casualty estimates. These estimates are grouped at the echelon and branch level. Within the individual branch levels, casualties are distributed to the MOS/grade level based on the branch population density.
FILE INPUT:	Population-at-risk (time-phased) by MOS/gradeCasualties (time phased)
USER INPUT:	Theater-level campaign simulation data collected at brigade level.
OUTPUT:	Report of MOS/grade losses over time
MODEL LIMITATIONS:	Vulnerability/loss rates are theater and scenario dependent, assume that casualties include KIA and MIA only and are extremely time consuming to develop.
HARDWARE:	 Computer: SPARC-IPC Operating system: SUN OS4.1 Peripheral equipment: 1 8mm tape drive, 1 laser printer
SOFTWARE:	Programming language: ANSI FORTRAN
DOCUMENTATION:	Available at US Army Concepts Analysis Agency
VALIDATION & VERIFICATION	Not given
TIME REQUIREMENTS:	 2 days to structure data in model input formats once other simulations have been completed. 5 minutes CPU time Minimal learning time Minimal time needed to analyze and evaluate results

SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	• 5 times per year
PRINCIPAL USERS:	US Army Concepts Analysis Agency
MISCELLANEOUS:	The Casualty Stratification Model operates as one component in a series of casualty projection models developed by the Concepts Analysis Agency.
KEYWORDS:	Model, simulation, MOS, casualties, vulnerability
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: CBS - Corps Battle Simulation, Version 1.5.4

NAME OF MODEL:	CDS - CORPS DATTLE SIMULATION, VERSION 1.3.4
STATUS:	Operational
PROPONENT:	National Simulation Center, 410 Kearney Ave, Fort
	Leavenworth KS 66027-1306
DEVELOPER:	Combat Developer - National Simulation Center
	Materiel Developer – Simulation Training & Instrumentation
	Command (STRICOM)
POINT OF CONTACT:	• David Sargent, COM (913) 684-8155, DSN 552-8155
PURPOSE:	CBS is the Corps/Division command and staff trainer in the Army's Family of Simulations (FAM&SIM). Its primary use is as a CPX driver for large-scale Army and Joint Exercises. One of its main uses is by the Battle Command Training Program (BCTP) in the conduct of Corps and Division
	Warfighters to train corps, division, and brigade staffs. CBS is the ground model in the Joint Training Confederation, which is used in large-scale joint exercises.
GENERAL	Domain: Land and air combined arms combat
DESCRIPTION:	Span: Theater & Corps Area of Operations
	 Mission areas represented: all elements of air-land battle including conventional and tactical nuclear combined arms warfare, indirect fire, close air support, battlefield air interdiction, airlift, maintenance, supply, and medical operations.
FILE INPUT:	 Direct fire combat results are determined by use of weapon-on-weapon Lanchester attrition calculations, supplemented by the expert system, Combat Outcome Based on Rules for Attrition (COBRA). Available databases/scenarios: SW Asia, expanded Europe, Western Europe, Central Europe, Bosnia, Philippines, Korea, North Japan, South Japan, Cuba, Nigeria, Algeria, SWUSA, Lantica, and Atlantis.
USER INPUT:	 Terrain Database Unit Database Systems Database Close combat data
OUTPUT:	 Military graphics overlaid on variable scale maps displayed on color vdts Orders, spot reports, and other output for controllers and training audience are output on dot matrix printers and to files.

MODEL LIMITATIONS:	• Unit limitation of between 15,000-20,000 units, depending on speed of computer used.
	No naval or amphibious play.
HARDWARE:	 Computer system: a network of one central processor (VAX 7620) and several Microvacs 3140 Ram/disk storage: 256 mb RAM for central processor and 16 meg RAM for each micro Vax
SOFTWARE:	SIM&SCRIPT II.5, C, OPS 5 expert system language
DOCUMENTATION:	A complete set of documentation for CBS 1.5.4 was published by the Jet Propulsion Lab. This includes the Executive Summary, User Guide, Analyst Guides, etc.
VALIDATION & VERIFICATION	 National Simulation Center performs V & V of each model version. STRICOM performs configuration management of the model.
TIME REQUIREMENTS:	 Several man-years to collect and enter complete data base set. Several man-weeks for moderate changes to force structure
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	On demand, used for approximately 10 WFX's and 5 JTC exercises each year. Additionally, used on demand by the Corps Battle Simulation Centers.
PRINCIPAL USERS:	All army Divisions, Corps, MACOMS
MISCELLANEOUS:	CBS is considered a legacy model and is in the maintenance mode. It will be replaced by WARSIM in a few years.
KEYWORDS:	Combat model, WFX, simulation, ground combat, Corps, Division.
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: CEM - CONCEPTS EVALUATION MODEL

NAME OF MODEL.	
STATUS:	Operational
PROPONENT:	US Army Concepts Analysis Agency
DEVELOPER:	US Army Concepts Analysis Agency
POINT OF CONTACT:	 William T. Allison DSN: 295-5236; COM: (301) 295-5236; FAX: DSN 295-5517; COM (301) 295-5517
PURPOSE:	CEM is used primarily to analyze force effectiveness at theater level warfare. It is designed to provide a tool to asses the effectiveness of different mixes of forces and resources and to estimate Force Capability, Force Requirements, and Munitions Requirements.
GENERAL DESCRIPTION:	 Domain: Combat, Land and air. Span: Accommodates any theater given a database. Simulates up to 400 days of conventional linear theater warfare. Mission areas represented: Command & Control, Fire Support, Brigade-level combat Level of detail: simulates command decisions at four levels from theater to division.
FILE INPUT:	 CEM Data Management System Available databases/scenarios: Korea, Central Europe, SW Asia for 1999, 2001, 29003; Ardennes Campaign, 1944
USER INPUT:	• None
OUTPUT:	• None
MODEL LIMITATIONS:	Does not model breakthrough, airborne assaults, engineer functions, transportation, lines, of communication, electronic, chemical, or nuclear warfare.
HARDWARE: SOFTWARE:	 Computer system: Cray XM-P/48; CRAY 2; CRAY YM-P, IBM RS-6000, PC-586 RAM: 1.4 million decimal words. Disk: 3 gbytes Peripherals: two tape drives or disks, one printer ASCII FORTRAN
	User Manual, Technical Description Manual
DOCUMENTATION: VALIDATION & VERIFICATION	US Army Concepts Analysis Agency. Sensitivity tests; simulation of historical battle (Ardennes Campaign, 1944)
TIME REQUIREMENTS:	 Time to prepare databases/scenarios: Acquisition - 2 months; preparation - 2 man-months
SECURITY CLASSIFICATION:	Unclassified

FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	USA CAA; Korean Institute for Defense Analysis; Republic of Korea Army Staff
MISCELLANEOUS:	Fully automated deterministic combat model. Requires combat attrition data from high level model.
KEYWORDS:	Combined arms, combat simulation, command and control, theater combat
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: CHAS - CHEMICAL HAZARD ASSESSMENT SYSTEM

NAME OF MODEL:	CHAS - CHEMICAL HAZARD ASSESSMENT STSTEM
STATUS:	Operational
PROPONENT:	AS/CFHD, Wright-Patterson AFB
DEVELOPER:	JAYCOR, Dayton Ohio under USAF contract to AL/CHFD, WPAFB
POINT OF CONTACT:	• Dr. C.R. Replogle DSN: 785-7583; COM: (513) 255-7583
PURPOSE:	 CHAS was developed in support of the SALTY CHASE Command Post Exercise in USAFE as a tool for hazard analysis, response training and hazard management for USAF bases. CHAS performs the following functions: Allows user to examine various chemical attack scenarios, to construct strategies for defense detector layout, and to plan postattack air base reconstitution Provides user with postattack status of air base personnel and material Provides user information on various aspects of chemical hazards.
GENERAL DESCRIPTION:	 Domain: land Span: local Environment: facilities with data base information, population centers, weather conditions Scope of conflict: air base operations and vulnerability Level of detail: chemical munitions delivery by missile, bombs, artillery. Casualties are reported for all population centers.
FILE INPUT:	Chemical munitions effects data base, model parameters (e.g., Agent data: physical constants, agent toxicity, equipment protection factors, detector thresholds)
USER INPUT:	Scenario development: attack profile, target profile, weather profile, detector profile (optional), population profile (optional)
OUTPUT:	Graphic display of chemical contamination, hardcopy plots of target area, casualty reports and casualty streams, detector status reports, building damage
MODEL LIMITATIONS:	Produces discrete "snapshots" of chemical challenge; personnel are stationary throughout the scenario; weather conditions are assumed constant for the duration of the chemical threat.
HARDWARE:	 Computer (OS): UNIX, XENIX, AIX Storage: 4 MB memory, 40 MB hard disk Peripherals: VGA monitor, mouse, printer (optional) and plotter

SOFTWARE:	Fortran 77, gks
DOCUMENTATION:	User Manual, Programmer Manual
VALIDATION & VERIFICATION	Not provided
TIME REQUIREMENTS:	 Or more man-hours to digitize basic target from facilities map Chemical munitions effects data base generated off-line at 15- 20 minutes per case
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	Weekly
PRINCIPAL USERS:	JAYCOR, AL/CFHD and HSD/YA (USAF), DRES (Canada), NRDEC (US Army), Saudi Arabia
MISCELLANEOUS:	•
KEYWORDS:	Air Force, analysis, chemical hazards, casualty stream
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: COSAGE - COMBAT SAMPLE GENERATOR

NAME OF MODEL:	COSAGE - COMBAI SAMPLE GENERATOR
STATUS:	Operational
PROPONENT:	Director, U.S. Army Concepts Analysis Agency
	ATTN: CSCA-SS, 8120 Woodmont
	Avenue, Bethesda, MD 20814-2797.
DEVELOPER:	US Army Concepts Analysis Agency
POINT OF CONTACT:	• John W. Warren, DSN: 295-1690; COM: (301) 295-1690.
	FAX DSN 295-5517; COM (301)295-5517
PURPOSE:	The principal application is the forecasting of personnel,
	ammunition and equipment requirements to determine Force Capability and Force Requirements. It is intended to provide
	division-level killer/victim scoreboards for calibration for the
	ATCAL (Attrition Calibration) algorithm.
CONTRACT	Domain: land and air
GENERAL DESCRIPTION:	Span: division area of operations
DESCRIPTION:	Mission areas represented: most mission areas associated
	with conventional combined arms are represented except for
	logistics and intelligence
	• Level of detail: Maneuver unit resolution is typically down to
	Blue platoons and Red companies. In the case of close
	combat, resolution is to the level of individual equipment or
	personnel and their weapons, with each direct fire shot
	modeled explicitly.
FILE INPUT:	Various European, Korean, SW Asian scenarios are available.
USER INPUT:	Unit organizations, strength and weapons; orders for each
	maneuver unit, weapons data, sensor capabilities, terrain
	parameters, movement rates, artillery organization and characteristics.
OVERNAME	Killer-victim scoreboard, personnel losses, ammunition
OUTPUT:	expenditures by shooter/target combination, materiel losses,
	and unit locations on plot by time.
	Graphical display of unit locations
MODEL LIMITATIONS:	Electronic, biological, chemical, and nuclear warfare are not
MODEL LIMITATIONS.	modeled, nor military operations in built-up areas. Logistics
·	and intelligence functions are not represented.
HARDWARE:	Computer system: IBM RS-6000 with AIX; also UNIX or
	VAX/VM&S
	Storage: 6 MB memory to run, 3 MB disk for model and
	input data, 10 MB disk for outputs
SOFTWARE:	Sim&script ii.5

DOCUMENTATION: VALIDATION &	 COSAGE User Manual, Combat Sample Generator Program Maintenance Manual, and COSAGE User's Manual Input/Output Guide US Army Concepts Analysis Agency
VERIFICATION TIME REQUIREMENTS:	6 man-months to acquire data plus 3 man-months to structure
TIME REQUIREMENTS:	data in model input form I man-month to analyze output
SECURITY CLASSIFICATION:	 Source code: unclassified Data: SECRET Documentation: Unclassified
FREQUENCY OF USE:	•
PRINCIPAL USERS:	US Army Concepts Analysis Agency
MISCELLANEOUS:	This is not a true medical model, but provides output that might be of interest to medical planners. The information listed herein was taken directly from the Web site below, and may not be current.
KEYWORDS:	Killer-victim scoreboard, personnel losses, ammunition expenditures
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL:

CSSTSS - COMBAT SERVICE SUPPORT TRAINING SIMULATION SYSTEM 1.5

STATUS:	Operational
PROPONENT:	National Simulation Center
1101010112111	Fort Leavenworth KS 66037-7301
DEVELOPER:	National Simulation Center, Logistics Exercise and
	Simulation Directorate
	• Fort Lee, VA 23801-1511
POINT OF CONTACT:	• Mr. Al Damour DSN: 539-1770; COM: (804) 765-1770; e-
	mail: Error! Bookmark not defined.
	• Mr. Joe Riley DSN: 765-1768; COM: (804) 765-1768; e-
	mail: Error! Bookmark not defined.
PURPOSE:	CSSTSS 1.5 is an exercise driver used to stimulate exercise
	play for the collective training of AC and RC commanders
	and staff personnel in command, control and coordination.
	The training audience includes the CSS commanders and
	staffs in Echelons Above Corps, Corps, Corps Support
	Commands, Divisions, and Division Support Commands as
	well as their subordinate headquarters down to the battalion
	level. It also trains combat commanders in the use of their
	logistics support.
GENERAL	Randomness: both stochastic and deterministic Randomness: both stochastic and deterministic
DESCRIPTION:	Domain: Will accommodate any theater depending on
	database
	Mission areas: personnel, aviation, base support, combat service support, command & control, engineering, NBC,
	ammunition, maintenance, liquid logistics, transportation,
	mortuary affairs, medical, reception, staging, onward
	movement and integration (RSOI), support of all conventional
	land warfare
	Level of detail: personnel is played to the individual name,
	grade, and MOS; supplies to the NSN, DODIC level of detail;
	movement to the Transportation Control Number level,
	medical tracks patients by wound type, availability of proper
	medical personnel, operating rooms, blood, Class VIII and
	evacuation assets, maintenance to the work order level of
	detail.
FILE INPUT:	TRADOC SRC database for unit populating
	European and Korean scenarios and a classified SWA
	scenario

USER INPUT: OUTPUT:	 Unit locations Supporting-supported relationships Supply point stockages Training audience participates by making management decisions Exercise control group translates decisions into simulation inputs Emulated STAMIS reports to training audience
	 Non-STAMIS reports to exercise control staff See also Level of Detail under Description.
MODEL LIMITATIONS:	This model is designed to track CSS functions down to the Direct Support Unit (DSU) level. It does not track the availability of supplies, ammo, or liquid logistics in combat units.
HARDWARE:	 Computer system: mainframe IBM 9121. Storage: 128 MB RAM/60 GB disk space per exercise. Peripherals: IBM 3490 tape devices Network: IBM 3745 Type communications controller. DEC channel server
SOFTWARE:	COBOL Special system requirements/libraries: OS/390 and CICS/ESA
DOCUMENTATION:	Under development
VALIDATION & VERIFICATION	 V&V performed during conduct of LOGEX, FPLX, AMEDDEX, and PW exercises. Proponent: National Simulation Center
TIME REQUIREMENTS:	 2-3 months to build and test scenario database 2 hours to process files and produce STAMIS reports
SECURITY CLASSIFICATION:	 C2 Minimum trusted class; can process up to Secret level Source code: unclassified Data: up to and including Secret
FREQUENCY OF USE:	Typically 10-12 times per year.
PRINCIPAL USERS:	LOGEX 89, 90, 92; FPLX 93; AMEDDEX 91-95; PRAIRIE WARRIOR 94-95; CASCADE STEEL 95; Division AWE 97, Reserve Component exercises
MISCELLANEOUS:	Linkage to CBS model complete
KEYWORDS:	• CSSTSS
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: CWTSAR - CHEMICAL WARFARE THEATER SIMULATION OF AIR BASE RESOURCES

STATUS:	Operational
PROPONENT:	AL/CFHD, Wright-Patterson AFB
DEVELOPER:	JAYCOR, Dayton, OH, under USAF contract to AL/CHFD, WPAFB
POINT OF CONTACT:	• Dr. C. R. Replogle, DSN 785-7583, COM (513) 255-7583
PURPOSE:	CWTSAR is a Monte Carlo discrete event simulation model of air base sortie generation operations in a CW environment for one or more air bases. A simulation consists of multiple trials, each spanning several days of air base operations and representing a complete Blue and Red scenario. CWTSAR incorporates the effects of chemical warfare into the existing framework of the TSAR model (developed by Rand Corp)
GENERAL	Domain: land
DESCRIPTION:	 Span: local Scope of conflict: conventional and chemical warfare Mission area: air base operations
FILE INPUT:	Air base descriptors, air base resources, task networks,
	mission tasking, attack data (resource loss data,
	runway/taxiway hit lists, chemical challenge history data),
	 chemical warfare factors, miscellaneous simulation data. Not required
USER INPUT:	-
OUTPUT:	 Primary air base operations measures (sortie generation data, personnel casualty data) Secondary air base operations measures (air base activities summaries, resource constraint data, aircraft maintenance summaries, runway/taxiway availability), raw simulation data
MODEL LIMITATIONS:	Extensive data requirements
·	 Restrictive work shift representations (12 on-12 off) Limited representation of aircrew operations and air base support processes No individual tracking of aircrews Only tactical aircraft operations simulation No measures of the effectiveness of the sorties flown
HARDWARE:	 Computer (OS): UNIX workstation or Windows 95/NT with a Unix command interpreter. Peripherals: none
SOFTWARE:	 Computer (OS): UNIX workstation or Windows 95/NT with a Unix command interpreter. Peripherals: none

Appendix B

DOCUMENTATION:	Limited
VALIDATION & VERIFICATION	Not specified
TIME REQUIREMENTS:	 Database development: from days to weeks Cpu time per cycle: Unix workstation: 1-4 hours; Pentium 200 with 64 MB RAM: 30-120 min; Pentium 266 with 128 MB RAM: 5-30 min.
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	According to contract requirements
PRINCIPAL USERS:	Simulation Technologies, Inc.
MISCELLANEOUS:	Air base operations, sortie generation, chemical/biological warfare, performance degradation
KEYWORDS:	
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: FASTALS

COT A TOYLO	Operational
STATUS:	•
PROPONENT:	Forces Directorate, US Army Concepts Analysis Agency
DEVELOPER:	Forces Directorate, US Army Concepts Analysis Agency
POINT OF CONTACT:	US Army Medical Department Center and School Assistant Commander for Force Integration ATTN.: MCCS-FCC-A Chief, Force Structure and Analysis Branch Fort Sam Houston, TX 78234-6175 Telephone DSN: 471-1746/2985; COM (210) 1746/2985
PURPOSE:	• The purpose of the FASTALS model is to compute administrative and logistical workloads and to generate the theater level support force structure requirements necessary to round out a combat force in a postulated confrontation. FASTALS may be used in any force planning simulation to develop a force that is balanced, time-phased, and geographically distributed. A troop list is said to be balanced when the individual units comprising the list are capable of accomplishing the various workloads generated by the total force. Troop lists are said to be time-phased when unit requirements re prescribed for each time period in the simulation. Support to combat units is defined as the logistics and administrative service necessary to support a tactical activity. The Major elements of support are maintenance, construction, supply, transportation, hospitalization, and evacuation, and personnel replacement. Requirements for units performing these functions are derived from workloads which are generated as a function of the combat force deployment, theater structure, and the tactical operations as developed in the warfighting model.
GENERAL DESCRIPTION:	• FASTALS is a table driven model, using factoring techniques for the majority of its computations. It is one-sided and requirements oriented and is designed to estimate logistical and administrative workloads in a theater of operations on the basis of the buildup of forces and their levels of activities, or combat intensity, over time. In addition to producing time phased, geographically distributed, support force requirements, FASTALS provides summary level detail on the numerous workloads generated over time, supply consumption and stockage, and noncombat (support) personnel loss estimates.

FILE INPUT: USER INPUT:	 The master file, which consists of the data necessary to allocate units and to prescribe unit support requirements. Additional scenario data includes length and number of time periods, damage factors, WIA and DNBI admission rates, and enemy prisoner of war (EPW) capture rates. Stock status. Scenario parameters:
	 Combat simulation data. Geographical depiction of the theater of operations. Prepositioned equipment. Prepositioned war reserve materiel stocks. Engineer support requirements. Supply data M-day units.
OUTPUT:	 Consumption. Construction requirements. Workload summary (i.e., US Army population, required hospital beds). Nondivisional personnel losses. Time-phased troop deployment list. Transportation analysis. Branch summary. Unit tonnage report.
MODEL LIMITATIONS:	• Limitations are primarily due to the complexity of inputs to the Master File and Scenario. All data must be entered in prespecified order and must agree in context via cross reference.
HARDWARE:	 Computer: Dual 486/66 MHz Processor. Operating System: SCO UNIX. Disk space: 20MB. Peripheral equipment: hard disk, printer.
SOFTWARE:	Programming language: FORTRAN.
DOCUMENTATION:	Complete in one manual with narratives and input formats.
VALIDATION & VERIFICATION	not specified
TIME REQUIREMENTS:	 The processing time is directly related to the size of the scenario developed by the planner. At the Directorate of Combat and Doctrine Development, processing time averages about 30 minutes. About two thirds of this time is devoted to input/output operations. 2 man-days to analyze and evaluate results. 1 man-week to modify existing data in model input format. 1 man-month tlearning time for users.

SECURITY CLASSIFICATION:	Unclassified.
FREQUENCY OF USE:	On demand.
PRINCIPAL USERS:	 Concepts Analysis Agency. Directorate of Combat and Doctrine Development, US Army Medical Dept. Center and School. US Army Combined Arms Support Command.
MISCELLANEOUS:	 Operates independently or in connection with other medical or nonmedical programs. KEYWORDS: Scenario, Master File, Workload, Materiel Transportation, Maintenance, Medical, Personnel, Construction, Force, Troop list, FORTRAN.
KEYWORDS:	
SOURCE OF INFORMATION:	AMEDD Catalog of Computer Models.

NAME OF MODEL: FORECAS

NAME OF MODEL.	
STATUS:	Operational
PROPONENT:	Naval Medical Research & Development Command
DEVELOPER:	Naval Health Research Center
POINT OF CONTACT:	• Christopher Blood, DSN 553-8386, COM (619)553-8386
PURPOSE:	 To provide medical planners with estimates of the average daily rates of medical admissions during a given scenario To indicate the maximum daily patient loads for which planning is necessary To enhance understanding of the statistical properties of injury and illness rates for use in future modeling efforts
GENERAL DESCRIPTION:	FORECAS is a casualty forecasting system
FILE INPUT:	Historical casualty database from WW2, Korea, Vietnam, Falklands
USER INPUT:	 Casualty incidence to be projected: DNBI, WIA, KIA Battle intensity: None, Light, Moderate, Heavy, or Intense Categories of troops: Infantry, Support, or Service Support Theater: Specific adversary Length of operation
OUTPUT:	 Graphical and tabular displays of wounded, killed, and illness incidence for each troop type Statistical summary screen for user-defined parameters
MODEL LIMITATIONS:	Not specified
HARDWARE:	 Computer: IBM or IBM-compatible PC, mouse Peripherals: EGA to SVGA monitor Storage: 1 MB RAM
SOFTWARE:	• Borland 3.1 C++
DOCUMENTATION:	Users Guide, Technical Report Output Description: Output
VALIDATION & VERIFICATION	Technical Document 94-2B, Naval Health Research Center
TIME REQUIREMENTS:	Not specified
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	Not specified
MISCELLANEOUS:	Casualty rates, casualty estimates

KEYWORDS:	Blood CG, Zouris JM & Rotblatt D. Using the Ground Forces Casualty Forecasting System (FORECAS) to project casualty sustainment. Naval Health Research Center Technical Report 97-39.
SOURCE OF INFORMATION:	

NAME OF MODEL: FORWARD SURGICAL TEAM (FST) SIMULATION

STATUS:	Operational
PROPONENT:	Directorate of Combat and Doctrine Development, US Army Medical Department Center and School.
DEVELOPER:	MAJ Robert Syvertson, ORSA Student, Naval Postgraduate School.
POINT OF CONTACT:	US Army Medical Department Center and School Assistant Commander for Force Integration ATTN.: MCCS-FCC-A Chief, Force Structure and Analysis Branch Fort Sam Houston, TX 78234-6175 Telephone DSN: 471-1746/2985 COM (210) 1746/2985
PURPOSE:	• The Forward Surgical Team model is a computer simulation of the far forward surgical care to be provided by a 20-man team co-located with the Division medical company at Level II. It is used to provide insight and analysis capability on resourcing levels, force structure, and utilization rates and to evaluate the FSTs capability to perform its wartime mission. The user can modify many of the model parameters, including casualty arrival rates, patient category percentages and resource levels.
GENERAL DESCRIPTION:	• The model is a stochastic simulation of far forward surgical care. Primary solution techniques involve probability distributions of patient arrivals and patient types. Treatment is simulated as a function of patient condition. It includes animated displays of the simulation. Statistical summaries are available for resource utilization, casualty data, and workload. The model has options to specify and capture additional output which may be listed or used as input to other models.
FILE INPUT:	 Casualty densities for pre-selected patient conditions. Casualty arrival rates. Waiting time thresholds.
USER INPUT:	Length of simulation.
OUTPUT:	 Operating room utilization. Staff utilization. Casualty waiting times. Casualty processing times. Statistics from multiple replications.
MODEL LIMITATIONS:	To be determined. Model is under development.

HARDWARE:	Computer: IBM compatible PC, 386 min., and 16MB RAM
	min.
	Operating system: M&S-DOS ver 5.0 or later.
	Disk space: 25 MB.
	Peripheral equipment: hard disk, printer.
SOFTWARE:	MedModel simulation software (COTS package).
DOCUMENTATION:	MedModel documentation is complete in two manuals. User
	and programmer/analyst documentation has not been developed.
VALIDATION &	US Army Medical Department Center and School
VERIFICATION	Assistant Commander for Force Integration
TIME REQUIREMENTS:	• 10 minutes run time, CPU.
	1 man-day preparation of scenario input data.
	3 man-days analysis and evaluation.
	1 man-day to enter basic patient data.
	• 5 man-days learning time for user.
SECURITY	• 10 minutes run time, CPU.
CLASSIFICATION:	1 man-day preparation of scenario input data.
	3 man-days analysis and evaluation.
	1 man-day to enter basic patient data.
	5 man-days learning time for user.
FREQUENCY OF USE:	On demand.
PRINCIPAL USERS:	Office of the Surgeon General, Department of the Army.
	Directorate of Combat and Doctrine Development, US Army
	Medical Department Center and School.
MISCELLANEOUS:	Operates independently. Long term objective is to build
	connectivity to other medical models to simulate all or select
	portions of theater/battlefield.
KEYWORDS:	Analytical, Model, Patient, Health Care, Manpower
	Utilization, Forward Surgical Team, Computerized,
	Stochastic, Medical, Simulation, Animation, Replications.
SOURCE OF	AMEDD Catalog of Computer Models
INFORMATION:	
IIII OIUIATION.	

NAME OF MODEL:

GLOBAL REQUIREMENTS ESTIMATOR FOR WARTIME MEDICAL SUPPORT (GREWMS)

STATUS:	Operational
	1 C Town Little TIC Amount
PROPONENT:	Assistant Commander for Force Integration, US Army Medical Department Center and School.
	1 C D I I I I I I I I I I I I I I I I I I
DEVELOPER:	
	Medical Department Center and School.
POINT OF CONTACT:	US Army Medical Department Center and School A sixty of Company and on Force Integration
	Assistant Commander for Force Integration
	: MCCS-FF
	Chief, Force Structure and Analysis Branch
	Fort Sam Houston, TX 78234-6175
	Telephone DSN: 471-1746/2985 COM (210)
	1746/2985
PURPOSE:	• This model was created to incorporate concepts developed
	during the 1984 Medical System Program Review (M&SPR). It has been improved since that time to use data derived from
	the DEPMEDS database. The primary purpose of GREWMS
	is to determine bed requirements by bed type for theater and
	CONUS hospitals under varying evacuation policies and
	delays.
	The GREWMS Model was originally developed in July 1984.
GENERAL	A data base was developed for operating room times, average
DESCRIPTION:	stay times, Armed Services Medical Regulating Office
	(ASMRO) categories, litter/ambulatory condition, and died in
	hospital percentages for the theater. In August 1985 operating
·	room times and average stay times for CONUS were added.
	After December 1985 the data was directly correlated to the
	DEPMEDS data base for bed stays and surgery times. It
	computes the mix of intensive, intermediate, minimal and
	convalescent beds as well as total required hospital beds,
·	operating room times, deaths in hospital, and intra- and inter-
	theater evacuations. For CONUS it computes required
	military and civilian beds for recovering patients and separate
	bed requirements for patients to be discharged for disability.
	Recent improvements permit variable evacuation policies,
	variable evacuation delays, and separate accounting for
	treatment of battle fatigue patients in the Combat
	Reconditioning Center.

Appendix B

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FILE INPUT:	ASMRO category associated with patient condition.
	Percentage who die in a hospital.
	Operating room times for theater and CONUS hospitals -
	minutes.
	Average stay times by bed type for theater hospitals - hours.
	Average stay times by bed type for CONUS hospitals - days.
USER INPUT:	Patient condition.
	Litter or ambulatory status of patient.
	Percentage field (currently unused).
	Type of CONUS hospital.
OUTPUT:	Hospital admission reports.
	Died in hospital reports.
	Hospital operating room reports.
	Hospital bed reports.
	Evacuation reports.
	Return to duty reports.
	Disability Discharge report.
	MODEL LIMITATIONS:
	None specified.
MODEL LIMITATIONS:	Computer: Dual 486/66 MHz Processor.
	Operating system: SCO UNIX.
	Disk space: 10MB.
	Peripheral equipment: hard disk, printer
HARDWARE:	FORTRAN programming language
SOFTWARE:	User and programmer/analyst documentation is complete and
	contained in one manual. Includes:
	Introduction.
	File descriptions.
	Run instructions.
	Sample reports.
	 Program/subroutine descriptions.
	Common block dictionary.
DOCUMENTATION:	Assistant Commander for Force Integration, US Army
	Medical Department Center and School.
VALIDATION &	Man-weeks learning time for user.
VERIFICATION	Man-months to acquire and audit data for a major update.
	Man-days to key data in model input format.
	Seconds run time.
TIME REQUIREMENTS:	Unclassified
SECURITY	On demand.
CLASSIFICATION:	
FREQUENCY OF USE:	US Army Medical Department Center and School.
PRINCIPAL USERS:	
TRINCITAL USERS:	

MISCELLANEOUS:	Model, Deterministic, Hospital, Bed Type, Patient, FORTRAN, Evacuation, CONUS, ASMRO.
KEYWORDS:	AMEDD Catalog of Computer Models
SOURCE OF INFORMATION:	

NAME OF MODEL: HCM - HEALTHCARE COMPLEX MODEL

STATUS:	Operational
PROPONENT:	US Army Medical Research and Materiel Command
DEVELOPER:	Vector Research, Inc.
POINT OF CONTACT:	Dr. George Miller, COM (734) 997-8900, Error! Bookmark not defined.
PURPOSE:	HCM is designed to assess the effects of reengineering healthcare delivery systems, including the addition of telemedicine capabilities, on the ability of patients to access healthcare services (including requirements for travel) and the quality and cost of those services. It is applicable to both deployment and peacetime care scenarios.
GENERAL DESCRIPTION:	• HCM is a Monte Carlo discrete event simulation that models the flow and treatment of patients within a network (or "complex") of facilities of varying clinical capabilities. It uses ICD-9 code based clinical descriptions of patients, assigns specific treatment protocols (represented as a sequence of healthcare services and associated resource requirements) to those patients, and tracks resource utilization associated with the healthcare services. It moves patients throughout the complex according to their need to access clinical resources that are assigned to facilities by the user in scenario construction. HCM allows some resources (e.g, specialist physicians) to be accessed via telemedicine where facilities have been assigned telemedicine capability in the scenario. HCM is data driven and is unlimited in its ability to represent categories and details of patients, clinical protocols, and facility resources.
FILE INPUT:	 Case mix distribution Clinical protocols Resource requirements for clinical services
USER INPUT:	 Network description (facilities, inter-facility transportation times) Population at Risk / Enrollment population by demographic category Facility preferences for evacuation, teleconsulting Facility-specific resources (provider mix, ancillary services, surgery, beds, telemedicine capability)

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OUTPUT:	Outputs can be categorized by facility, patient type, patient
	priority, type of healthcare service, clinical specialty, or other
	dimensions as required by the user and include:
	Utilization of providers, ancillary services, beds
	Patient movement patterns
	Telemedicine consults
	Access to specialty care (timeliness)
MODEL LIMITATIONS:	HCM is data driven and is limited only by the amount and
	detail of the input data set.
HARDWARE:	Computer: Pentium 100 MHz Processor, 32 MB RAM
THE WILL.	Operating System: Windows 95
	Disk space: 100 MB (varies with input data and run length)
	Peripheral Equipment: Printer
SOFTWARE:	• MedModel 3.5 (HCM 1.0)
SOFI WARE.	Microsoft Access 2.0 (HCM 1.0)
	Microsoft Excel 5.0 (HCM 1.0)
	Software requirements for HCM 2.0 are to be determined
DOCUMENTATION:	HCM 1.0 Methodology Manual
DOCUMENTATION:	HCM 1.0 User's Manual
	HCM 1.0 Reference Guide
	HCM Executive Summary
VALIDATION &	None for HCM 1.0
VERIFICATION &	HCM 2.0 scheduled for V&V in 1998
	2-4 person-days learning time for basic users (scenario
TIME REQUIREMENTS:	construction excepting clinical protocols)
	 2 person weeks learning time for advanced users (complete
	scenario construction)
	Minimum 1 person-week data development for complete
	scenario construction
CECTIVE	Unclassified
SECURITY	Officialistica
CLASSIFICATION:	0.1
FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	To be determined
MISCELLANEOUS:	Operates independently. Part of a planned hierarchy of
	healthcare simulation models that includes the Healthcare
	Management Model (HMM). HCM 2.0 scheduled for
	completion in December 1998.
KEYWORDS:	Model, Simulation, Healthcare, Protocol, Telemedicine,
	Scenario, Entity-based, Requirements, Planning, Stochastic,
	MedModel, Treatment
SOURCE OF	Vector Research, Inc., Ann Arbor MI
INFORMATION:	
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NAME OF MODEL: HQ AMC AE

NAME OF MODEL.	HQ AMC AL
STATUS:	Development completed.
PROPONENT:	USAF HQ AMC/SGXP
DEVELOPER:	 USAF HQ AMC/SGXPpoint of contact: Maj Jim Lorraine, DSN 576-2205
POINT OF CONTACT:	• The model calculates a strategic, CONUS, and notional theater AE aircraft, AE crew, augmentee, patient movement item, CONUS bed, and CONUS staging bed requirement. (Theater is notional because model can not distribute casualty stream generation across multiple points of a theater and is constrained by current evacuee calculators.)
PURPOSE:	• The Model was developed between Mar 1994 and Mar 1997. At this point it is considered completed. There have been plans to migrate this methodology to the TRANSCOM Regulating and Command and Control Evacuation System (TRAC2ES). Portions of the patient characterization methodology and output data have been adopted by HQ AF/SG (WARMEDS).
GENERAL DESCRIPTION:	 The Defense Medical Standardization Board (DMSB) Task Time Treater Files (TTTF), The Services distribution of patients (Probability of occurrence), - HQ AMC's in-flight care requirement for each TTTF, HQ AMC XPY (Studies and Analysis Flight) aircraft capability data - Evacuee streams from either the theater CINC/SG or CJCS J-4 MRD Reported CONUS bed capabilities from the Integrated CONUS Medical Operations Plan (ICMOP) and VA/NDMS bed reporting exercises.
FILE INPUT:	Run scenario Data
USER INPUT:	AE crew, augmentee, patient movement item, CONUS bed, and CONUS staging bed requirement.
OUTPUT:	Model cannot distribute casualty stream generation across multiple points of a theater and is constrained by current evacuee calculators
MODEL LIMITATIONS:	 486DX/33 or higher 500 Kbytes, minimum 3.5", 1.44 MB
HARDWARE:	Microsoft Excel
SOFTWARE:	• TBA

DOCUMENTATION:	No formal Validation and Verification has been accomplished.
VALIDATION & VERIFICATION	Uncertain
TIME REQUIREMENTS:	Unclassified, but some databases may be classified
SECURITY CLASSIFICATION:	On demand
FREQUENCY OF USE:	HQ AMC USAF/SGXP
PRINCIPAL USERS:	Air Force, analysis, casualty stream, bed requirements, patient movement
MISCELLANEOUS:	HQ AMC USAF/SGXP
KEYWORDS:	
SOURCE OF INFORMATION:	

NAME OF MODEL: JANUS

STATUS:	Operational
PROPONENT:	 Advanced Concepts Requirements: Director, US Army TRADOC Analysis Command-White Sands Missile Range TRAC (TRADOC Analysis Center) JANUS Development Division Wargame Directorate White Sands Missile Range, NM 88002-5002 Training: Director, National Simulation Center USACAC Attn: ATZL-NSC-M Fort Leavenworth KS 66027-5000
DEVELOPER:	 Analysis Enhancements: TRAC White Sands Training Enhancements (STRICOM)
POINT OF CONTACT:	 (ACR) Dr. R. M. Parish, DSN 258-4949, COM (505)678-4949, e-mail parishr@trac.wsmr.amy.mil (Training) MAJ John Donovan, DSN 552-8119, COM (913) 684-8119
PURPOSE:	 JANUS is a multipurpose ground combat simulation wargame. It is an interactive, near-real-time model developed to explore the relationships of combat and tactical processes. Types of uses are scenario development, weapon systems performance, test planning, test augmentation, seminars on tactics, techniques, procedures, exercise driver, operations support, combat developments evaluations, tactical commander training and unit training.
GENERAL DESCRIPTION:	 Domain: air, land, sea (littoral areas) Span: can accommodate any locale, depending upon data. Battalion, Brigade, and Company combat operations are conducted. Network applications are tailored for specific needs; DIS compliant. Mission areas: conventional and low-intensity conflict. Level of detail: Individual soldiers or individual systems are lowest entities modeled.

FILE INPUT:	 Available databases/scenarios: TRADOC Standard High Resolution Scenarios plus locally developed scenarios for training use. Weapons, sensor, and system performance; weapons, sensor, and system characteristics; terrain, artillery and forces information are required inputs. user input: Runscreen parameters; tactical decisions during combat via graphical interface with computer. Hardcopy output of game statistics, artillery summaries, direct
USER INPUT:	fire reports, range analyses, detection tables, and killer-victim scoreboards. Also provides a graphical replay, graphical statistics and measures of casualties, and rerun capability.
OUTPUT:	Area fire of direct fire weapons is not assessed, illumination rounds are not played and nuclear phenomena such as dazzle, induced radiation fallout, and EMP effects are not currently assessed. For any given issue, the scope or level of detail may not be sufficient to address.
MODEL LIMITATIONS:	 Computer system: HP workstations with X-Windows and UNIX operating system. Storage: 128 MB RAM and 2 GB mass storage (HP only) Peripherals: Tektronix UNIX-X-Window Workstation, one or two graph tablets and pucks per workstation, one printer. Network: Ethernet or UNIX system, T1, ISDN, DSI, depends on sites connected.
HARDWARE:	FORTRAN 77 and C.
SOFTWARE:	User Manual, Database Manager's Manual, Release Notes
DOCUMENTATION:	 Verified and Validated during numerous COEAs, continuous feedback from users. Proponents: TRAC and STRICOM
VALIDATION & VERIFICATION	 2 weeks to create new database and check it 2 days when only modifications are needed Study results usually available in 1 to 6 weeks
TIME REQUIREMENTS:	Code is unclassified; databases may be classified
SECURITY CLASSIFICATION:	Daily
FREQUENCY OF USE:	Numerous US military users; Australia, France (2 sites), Germany, Canada, United Kingdom, Korean Institute for Defense Analysis
PRINCIPAL USERS:	In process of updating documentation
MISCELLANEOUS:	Wargames, Interactive, Stochastic, Multi-sided, Entity-based, Network applications

KEYWORDS:	
SOURCE OF	Error! Bookmark not defined.
INFORMATION:	

NAME OF MODEL: JCATS - JOINT CONFLICT AND TACTICAL SIMULATION

NAME OF MODEL.	
STATUS:	Scheduled Delivery March 1998
PROPONENT:	Joint War Fighting Center (JWFC), Fort Monroe VA 23651
DEVELOPER:	Conflict Simulation Laboratory (CSL) at Lawrence Livermore National Laboratory (LLNL).
POINT OF CONTACT:	LTC Dan Snyder, DSN 680-6430; COM (757) 726-6430; e-mail: snyder@jwfc.js.mil
PURPOSE:	• The Joint Conflict and Tactical Simulation (JCATS) is a multi-sided, interactive, entity level, joint conflict simulation. JCATS capabilities will include the ability to conduct Joint Task Force level exercises across the entire spectrum of war, to include Operations Other Than War and highly specialized operations. JCATS is the result of a merge between the Error! Bookmark not defined. (JTS) and the Error! Bookmark not defined. (JCM). It will contain the important capabilities of each model.
GENERAL DESCRIPTION:	• JCATS' training focus will include the strategic through tactical levels and will be an extremely effective tool for training, analysis, and mission planning and rehearsal. Among the unique capabilities to be provided by JCATS is very detailed modeling of small group tactics in rural or urban terrain and modeling day or night operations with artificial lighting. JCATS will also allow for dynamic aggregation and de-aggregation of units during the game allowing the user to play at the JTF level with larger numbers of entities with fewer players.
FILE INPUT:	Weapon and platform characteristics, PH/PK data, terrain, force organization, and force orders and plans, graphic symbology
USER INPUT:	The user may modify all modeling data.
OUTPUT:	 formatted positional reports event history files, including movement, combat and attrition, logistics and intelligence information
MODEL LIMITATIONS:	not specified
HARDWARE:	Computer: Hewlett Packard 9000 Series 700 and/or the J series of UNIX workstations or Sun Solaris workstation suite.
SOFTWARE:	C and C++
DOCUMENTATION:	Refer to Error! Bookmark not defined.
VALIDATION & VERIFICATION	not specified

TIME REQUIREMENTS:	initial databases may take several man-weeks
SECURITY	Unclassified, but databases may be classified
CLASSIFICATION:	
FREQUENCY OF USE:	not specified
PRINCIPAL USERS: MISCELLANEOUS:	 Dept of Defense: US Army Europe (8 sites), Air Force Security Police Agency (50 sites), Special Operations Command (MacDill, & Fort Bragg), Joint Warfighting Center, Pacific Command, US Marine Corps (Quantico), Southern Command, Marine Defense Zone Pacific (San Diego), 1 IN Div (Ft Riley), I Corps (Ft Lewis), National Simulation Center, Joint Readiness and Training Center. Dept of Energy: Lawrence Livermore Nat'l Laboratory (Analytical Group and Safeguards & Security), Sandia Laboratories (Analytical Group), and Savannah River (Safeguards and Securities). Dept of Treasury: US Secret Service Proposed enhancements for JCATS pending CCB approval:
	 Integration of Joint Functionality Link with DISA's C4ISR model (Command, Control, Communications, Computers, Intelligence Surveillance, and Reconnaissance) Integration with COMPASS system Link with the Joint Theater Level Simulation (JTLS) Other potential enhancements for JCATS are: Integration of space capabilities A crowd model and a traffic model which includes convoy capability A language to input simple conditional tactics and doctrine to allow Modification of rules of engagement Integration with a detailed atmospheric model allowing weather modeling and the ability to simulate a chemical or biological release in a battlefield context Terrain generation from satellite imagery and other available data sources Enhanced logistics play
KEYWORDS:	Training model, attrition, logistics
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: LPXMED - EXTERNAL LOGISTICS PROCESSOR, MEDICAL MODULE

STATUS:	Operational
PROPONENT:	Joint Staff/J4-Medical Readiness Division (MRD)
DEVELOPER:	Booz-Allen & Hamilton, Inc.
POINT OF CONTACT:	 Joint Staff/J4-Medical Readiness Division (MRD) Telephone: DSN:223-5103/0510 COM:(703) 697-0510
PURPOSE:	• The External Logistics Processor (LPX) Medical Module is a functional area simulation for the medical processes that occur within a theater of operations. It is intended to permit medical planners to make real-time decisions about the employment of medical support, test courses of action, assess the impact of force or asset shortages, and minimize the impact of logistics weaknesses.
GENERAL DESCRIPTION:	• The External Logistics Processor (LPX) Medical Module is a functional area simulation for the medical processes that occur within a theater of operations. It is intended to permit medical planners to make real-time decisions about the employment of medical support, test courses of action, assess the impact of force or asset shortages, and minimize the impact of logistics weaknesses.
FILE INPUT:	 Casualty and Combat Unit data. Casualty arrival rates and intensities. Facility locations and configurations. Evacuation resources and routes. Facility staffing data. Facility supply data. The model can be run with default data for any or all elements
USER INPUT:	Scenario parameters
OUTPUT:	 Medical facility utilization data to include staff, supplies, beds, evacuation, total. Evacuation route analysis. Casualty unit analysis. Shortfall reports.
MODEL LIMITATIONS:	Macro model / broad content limits capability for detail in specific areas and increases run time and platform required.

	Computer: IBM compatible PC, 386 min, 12MB RAM min.
HARDWARE:	Operating system: M&S-DOS ver 5.0 or later with Microsoft
	Windows 3.1 or later.
	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	• Disk space: 10 MB.
	Peripheral equipment: hard disk, printer.
SOFTWARE:	LPXMED simulation software.
DOCUMENTATION:	• LPXMED documentation is complete in one manual provided by the developer.
VALIDATION & VERIFICATION	Joint Staff/J4-Medical Readiness Division (MRD)
TIME REQUIREMENTS:	• 30 minutes run time, CPU, per replication.
Three Regulations	2 man-days preparation of scenario input data.
	5 man-days analysis and evaluation.
	2 man-days learning time for user.
SECURITY	Unclassified
CLASSIFICATION:	
FREQUENCY OF USE:	On demand (daily by some users)
PRINCIPAL USERS:	CINC medical planners
THINCH HE OSERS.	Joint Staff
	Services' Major Command medical planners.
MISCELLANEOUS:	In the process of being replaced by Medical Analysis Tool.
KEYWORDS:	Analytical, Model, Theater, Logistics, Health Care, Computerized, Medical, Simulation, Scenario, Course of Action.
SOURCE OF	AMEDD Catalog of Computer Models
INFORMATION:	

NAME OF MODEL: MARC-ES

NAME OF MODEL.	
STATUS:	Operational
PROPONENT:	Naval Medical Research & Development Command
DEVELOPER:	Naval Health Research Center
POINT OF CONTACT:	 Paula Konoske, Ph D COM (619) 553-0730; DSN 553-0730; e-mail: Error! Bookmark not defined.
PURPOSE:	MARC-ES is a program for estimating clinical documentation storage requirements. It provides the user with a tool to estimate the space required to store medical data at each echelon of care for selected operational theaters.
GENERAL DESCRIPTION:	MARC-ES calculates storage requirements for a variety of scenarios using medical documentation requirements, casualty rates, and casualty flows.
FILE INPUT:	 Patient Condition rates for MRCE and MRCW Patient Flow Documentation requirements
USER INPUT:	 Class Echelon Theater Patient Condition Upload site Chip size
OUTPUT:	Graphical and tabular reports projecting storage requirements for a deployable field medical device.
MODEL LIMITATIONS:	None specified.
HARDWARE:	 Computer: 386DX/33MHZ or better processor; 486/66 MHZ recommended. Windows 3.1 or later 4.0 MB minimum of free disk space for installation; with 8 to 16 MB memory recommended for running. VGA color display, Super VGA recommended.
SOFTWARE:	Borland Delphi
DOCUMENTATION:	 Konoske PJ & Dobbins RW. A Computer Program for Estimating Medical Information Storage Requirements. Technical Document 96-6F, Naval Health Research Center. Konoske PJ, Dobbins RW & Gauker ED. Marc-Es: a computer program for estimating medical information storage requirements. Military Medicine, 163, 1:049, 1998.
VALIDATION & VERIFICATION	Not specified.

TIME REQUIREMENTS:	• 5-10 minutes
SECURITY CLASSIFICATION:	Unclassified, but some data files may be classified.
FREQUENCY OF USE:	Not known
PRINCIPAL USERS:	Medical planners and logisticians
MISCELLANEOUS:	Model may be modified to estimate requirements for other storage technologies.
KEYWORDS:	MARC, Medical documentation, MEDTAG, combat casualty care
SOURCE OF INFORMATION:	Technical Document 96-6F, NHRC

NAME OF MODEL: MAT - MEDICAL ANALYSIS TOOL

STATUS: PROPONENT: DEVELOPER: POINT OF CONTACT: PURPOSE: • The Medical Analysis Tool is both a Requirements Generator and a Course-of-Action analysis tool. Development of the MAT Requirements Generator has been expedited to fill the void created by the decision to turn off the legacy World Wide Military Command and Control System (WWMCCS), which includes the Medical Planning Module (MPM). • The underlying modeling methodology in the MAT Requirements Generator parallels the approach used in MPM. MAT uses an expected value model that determines requirements (primarily 'beds') by time period. Patient evacuation, treatment, and death from the previous period, together with new casualties, determine requirements for the current period. In general, this model represents the treatment and movement of patients through the medical system (the 'flow') day-by-day (or hour-by-hour). • The underlying modeling methodology in the MAT Requirements Generator parallels the approach used in MPM. MAT uses an expected value model that determines requirements (primarily 'beds') by time period. Patient evacuation, treatment, and death from the previous period, together with new casualties, determine requirements for the current period. In general, this model represents the treatment and movement of patients through the medical system (the 'flow') day-by-day (or hour-by-hour). FILE INPUT: USER INPUT:		
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FILE INPUT: USER INPUT: OUTPUT: MODEL LIMITATIONS: HARDWARE: SOFTWARE: DOCUMENTATION: VALIDATION & VERIFICATION		Requirements Generator parallels the approach used in MPM. MAT uses an expected value model that determines requirements (primarily 'beds') by time period. Patient evacuation, treatment, and death from the previous period, together with new casualties, determine requirements for the current period. In general, this model represents the treatment and movement of patients through the medical system (the 'flow') day-by-day (or hour-by-hour). The underlying modeling methodology in the MAT Requirements Generator parallels the approach used in MPM. MAT uses an expected value model that determines requirements (primarily 'beds') by time period. Patient evacuation, treatment, and death from the previous period, together with new casualties, determine requirements for the current period. In general, this model represents the treatment and movement of patients through the medical system (the
OUTPUT: MODEL LIMITATIONS: HARDWARE: SOFTWARE: DOCUMENTATION: VALIDATION & VERIFICATION	FILE INPUT:	110W) day by day (of field by field).
MODEL LIMITATIONS: HARDWARE: SOFTWARE: DOCUMENTATION: VALIDATION & VERIFICATION	USER INPUT:	
HARDWARE: SOFTWARE: DOCUMENTATION: VALIDATION & VERIFICATION	OUTPUT:	
SOFTWARE: DOCUMENTATION: VALIDATION & VERIFICATION	MODEL LIMITATIONS:	
DOCUMENTATION: VALIDATION & VERIFICATION	HARDWARE:	
VALIDATION & VERIFICATION	SOFTWARE:	
VERIFICATION	DOCUMENTATION:	
TIME REQUIREMENTS:		
	TIME REQUIREMENTS:	

DEPARTMENT OF DEFENSE MODELS AND SIMULATIONS

SECURITY CLASSIFICATION:	
FREQUENCY OF USE:	
PRINCIPAL USERS:	
MISCELLANEOUS:	
KEYWORDS:	
SOURCE OF INFORMATION:	

NAME OF MODEL: MEDEVAC - MEDICAL EVACUATION SIMULATION

NAME OF MODEL:	MEDEVAC - MEDICAL EVACUATION SIMULATION
STATUS:	Operational
PROPONENT:	Assistant Commander for Force Integration, US Army Medical Department Center and School.
DEVELOPER:	Assistant Commander for Force Integration, US Army Medical Department Center and School.
POINT OF CONTACT:	US Army Medical Department Center and School Assistant Commander for Force Integration ATTN.: MCCS-FF Chief, Force Structure and Analysis Branch Fort Sam Houston, TX 78234-6175 Telephone DSN: 471-1746/2985; COM (210) 1746/2985
PURPOSE:	The Medical Evacuation model is a computer simulation of patient movement from echelon I through echelon III of care in a theater of operations. It is used to provide insight and analysis capability on resource requirements and allocation methods for ground and air evacuation platforms to support a given patient workload.
GENERAL DESCRIPTION:	• The model is a discrete event simulation of medical evacuation and patient movement within a theater of operations. Patients entering the health care system are identified with a patient condition code. Each patient is assigned attributes for each echelon of care based on their patient condition code. The attributes include the average length of stay, evacuation precedence, litter/ambulatory status, and if the patient will be returned to duty, evacuated to the next level of care, or dies-of-wounds. Primary solution techniques involve probability distributions of patient arrivals and patient types. Patient processing is simulated as a function of patient condition and evacuation resources available. The model includes animated displays of the simulation. Statistical summaries are available for resource utilization, casualty data, and workload. The model has options to specify and capture additional output which may be listed or used as input to other models.
FILE INPUT:	 Operational. (enroute times, patient workload, downtimes). Resources. (number evacuation platforms by type and location, number of crews to man the evacuation platforms by type and location). Medical Technology. (Patient priority, distributions, arrival rates, treatment delays and thresholds). Command and Control. (Rules for evacuation platform use, evacuation chain).

USER INPUT:	No user input.
OUTPUT:	Patient statistics for each level.
001101.	Evacuation platform use statistics.
	Load configurations.
	Statistics on thresholds exceeded.
	Statistics from multiple replications.
MODEL LIMITATIONS:	• The only factor limiting the size of the model is the amount of
	RAM in your computer.
HARDWARE:	Computer: IBM compatible PC, 486 min, 8 MB RAM min
	(must be 8 MB extended memory).
	24 MB Permanent Swap File
	Operating system: M&S-DOS ver 5.0 or later.
	Disk space: 25 MB.
	• VGA Monitor (640 x 480)
	Peripheral equipment: hard disk, printer.
SOFTWARE:	MedModel simulation software, version 3.5 (COTS package).
DOCUMENTATION:	MedModel documentation complete in two manuals. User and
	programmer/analyst documentation has not been developed.
VALIDATION &	Assistant Commander for Force Integration, US Army
VERIFICATION	Medical Department Center and School.
TIME REQUIREMENTS:	20 minutes run time, CPU.
	2 man-days preparation of scenario input data.
	5 man-days analysis and evaluation.
	5 man-days learning time for user.
SECURITY	Unclassified
CLASSIFICATION:	
FREQUENCY OF USE:	On demand.
PRINCIPAL USERS:	Office of the Surgeon General, Department of the Army.
TRINCH AL USERS.	Director, Directorate of Combat and Doctrine Development,
	US Army Medical Dept. Center and School.
	US Army Medical Department Center and School
MISCELLANEOUS:	Operates independently. Long term objective to build
	connectivity to other medical models to simulate all or select
	portions of theater/battlefield
KEYWORDS:	Analytical, Model, Patient, Health Care, Evacuation,
	Ambulance, Helicopter, Medevac, Computerized, Stochastic,
	Medical, Simulation, Animation, Replications.
SOURCE OF	AMEDD Catalog of Computer Models
INFORMATION:	

NAME OF MODEL:

MEDISIM - SIMULATED MEDICAL CORPSMEN FOR MEDICAL FORCES PLANNING AND TRAINING

STATUS:	Completed
PROPONENT:	DARPA
DEVELOPER:	 University of Pennsylvania, Medical College of Pennsylvania Naval Postgraduate School Sandia National Laboratories
POINT OF CONTACT:	Dr. Norman Badler, Director Center for Human Modeling and Simulation University of Pennsylvania (215) 898-5862 or e-mail: badler@central.cis.upenn.edu
PURPOSE:	The MediSim system extends virtual environments to represent simulated medical personnel interacting with simulated casualties to train medical corpsmen in initial casualty assessment, management, stabilization, and transport.
GENERAL DESCRIPTION:	 MediSim is a prototype real-time injury assessment and management system for training military medics. MediSim uses Jack® human simulation software to simulate medical personnel interacting with casualties on a virtual battlefield. Medic trainees can use the system to examine and treat soldiers afflicted by various virtual injuries. Currently, the medic can 'perform' medical procedures either using an interactive, menu-driven interface or through suitable virtual reality (VR) equipment. Future work includes an artificial intelligence-based medical instructor to critique the performance of the trainee.
FILE INPUT:	 None user input: Menu-driven commands to drive simulated medic to assess and treat virtual casualty Individual virtual environment interfaces Voice commands to simulated medical assistant
USER INPUT:	Interactive simulation
OUTPUT:	None specified
MODEL LIMITATIONS:	Silicon Graphics workstation
HARDWARE:	JACK® human simulation software

SOFTWARE:	 Badler N.I. et al. MediSim: Simulated Medical Corpsmen and Casualties for Medical Forces Planning and Training. The National Forum: Military Telemedicine On-Line Today. Research, Practice and Opportunities. IEEE Computer Society Press, 1995. Chi D.M. et al. Casualty Modeling for Real-Time Medical Training. PRESENCE: Teleoperators and Virtual Environments. Special Issue on the Human Figure in Virtual Environment Systems. In press.
DOCUMENTATION:	Not specified
VALIDATION & VERIFICATION	Not specified
TIME REQUIREMENTS:	Unclassified
SECURITY CLASSIFICATION:	Not specified
FREQUENCY OF USE:	Intended for military medics
PRINCIPAL USERS:	medical training, simulated casualties and medical corps, virtual environments, human models
MISCELLANEOUS:	Error! Bookmark not defined.
KEYWORDS:	
SOURCE OF INFORMATION:	

NAME OF MODEL: MEDTRAN MODEL

NAME OF MODEL.	
STATUS:	Development completed
PROPONENT:	HQ USAFE/SG
DEVELOPER:	BDM International, Inc., under contract to HQ USAFE/SG
POINT OF CONTACT:	• Col Lynn Duffany, +49-6371-47-7516
PURPOSE:	MedTran is a simulation of the aeromedical evacuation system. The model provides information about waiting times and costs for different system configurations of AE routes, aircraft types, and patient loads.
GENERAL DESCRIPTION:	 The model simulates the allocation of resources (aircraft) to meet demand (patients needing transport) subject to system constraints (channel missions, rules on patient priorities). The model is a discrete-event simulation of a resource allocation/queuing problem. The user interface is through a series of dialog boxes that allow the user to define objects (airfields, aircraft types, individual airplanes, and missions) as well as other system settings (run length, location of external files, etc.).
FILE INPUT:	Patient data is input through an external file created from a Defense Medical Regulating Information System (DMRIS) output file. The DMRIS file is manipulated through a series of automated database queries to produce the patient file.
USER INPUT:	Airfields, aircraft types, airplanes, missions, run length, location of external input and output files
OUTPUT:	 Summary report showing flying and crew duty hours, cost, special missions and waiting time data by patient movement priority Detailed cost report by mission Detailed workload (flying and crew duty hours) by mission Report showing patient input data Graphs showing time in transport and in system, customizable by patient movement priority and airfield
MODEL LIMITATIONS:	Number of patients, airfields, missions, aircraft not limited by model
HARDWARE:	• 486 PC (Pentium preferred), 8 Mb RAM (16 Mb preferred)
SOFTWARE:	Windows 95; Microsoft Access to create patient file (not required)
DOCUMENTATION:	Users Manual
VALIDATION & VERIFICATION	In progress

TIME REQUIREMENTS:	HQ USAFE/SG and USAFE TPMRC
SECURITY CLASSIFICATION:	HQ USAFE/SG, Ramstein AB, GE
FREQUENCY OF USE:	
PRINCIPAL USERS:	
MISCELLANEOUS:	
KEYWORDS:	
SOURCE OF INFORMATION:	

NAME OF MODEL: MERLIN (MEDICAL READINESS LEARNING INITIATIVE)

NAME OF MODEL:	MERLIN (MEDICAL READINESS LEARNING INITIATIVE)
STATUS:	Operational
PROPONENT:	Assistant Secretary of Defense for Reserve Affairs, in coordination with the Office of the Assistant Secretary of Defense for Health Affairs
DEVELOPER:	Uniformed Services University of the Health Sciences, in collaboration with the Henry M. Jackson Foundation for the Advancement of Military Medicine
POINT OF CONTACT:	Dr. Eric B. Allely MD Henry M. Jackson Foundation for the Advancement of Military Medicine 1401 Rockville Pike Suite 600, Rockville MD 20852-1428 Phone (301) 424-0800 ext 1030 Email: <allely@tekamah.com></allely@tekamah.com>
PURPOSE:	 MERLIN is part of a greater strategy called distance learning which attempts to leverage existing technology to get training curricula out to Active Components as well as to National Guard and Reserve members around the country and around the world.
GENERAL DESCRIPTION:	 MERLIN is a computer-based simulation which provides realistic training for casualty management. It is an interactive readiness training program designed to improve triage skills and one's ability to work as a team member.
FILE INPUT:	 MERLIN is a computer-based simulation which provides realistic training for casualty management. It is an interactive readiness training program designed to improve triage skills and one's ability to work as a team member.
USER INPUT:	 Interactive responses at decision points in the patient care process.
OUTPUT:	 Video and graphical presentations of patient conditions and treatment methodology, along with scoring and feedback on user performance.
MODEL LIMITATIONS:	None specified
HARDWARE:	Utilizes off-the-shelf computer equipment
SOFTWARE:	Easy access through the Internet and World Wide Web
DOCUMENTATION:	Executive Report: "MERLINEvaluation at Operation Arch Angel"
VALIDATION & VERIFICATION	All medical data is SME approved. The evaluation of the softwar's training impact continues at live field exercises.
TIME REQUIREMENTS:	A training session lasts from 4 to 6 hours.

SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	Daily
PRINCIPAL USERS:	Navy Corpsmen and buddy-system trainees
MISCELLANEOUS:	A cohort study conducted at Operation Arch Angel showed that the group trained on MERLIN showed a dramatic reduction in cycletime for casualty triage and stabilization.
KEYWORDS:	Medical training, corpsmen training, casualty care training, distance learning
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: MOBCEM - MOBILIZATION CAPABILITIES EVALUATION MODEL

NAME OF MODEL:	MOBCEM - MOBILIZATION CAPABILITIES EVALUATION MODEL
STATUS:	Operational
PROPONENT:	US Army Concepts Analysis Agency
	ATTN. CSCA_SS
	• 8120 Woodmont Ave., Bethesda MD 20814-2797
DEVELOPER:	US Army Concepts Analysis Agency
POINT OF CONTACT:	• John W. Warren, DSN 295-1690. COM (301) 295-1690
PURPOSE:	MOBCEM supports the analysis of current and projected Army (and eventually other services) mobilization capabilities and performance. This model will provide the capability to determine shortfalls in the mobilization system and examine the effects of potential changes in policies or resources.
GENERAL DESCRIPTION:	 Domain: Mobilization, Readiness Span: Mobilization levels up through full mobilization; typical model run will cover approximately 180 days. Mission areas: Mobilization, training, base support
FILE INPUT:	 A list of deploying forces; individual flow rates of trainees, inductees, RT-8 etc.; Policy decisions on use of PWRS and logistics plans; mobilization stations; process rates/capabilities; equipment. Input data is extracted from many standard data sources - TAEDP, SAMAS, TPFDD, PERSACS, TAPDB, CSM, MOBMAN, MPES, PROFIS
USER INPUT:	 Interactive preprocessor: analyst controls scenario parameters Interactive postprocessor - report generation
OUTPUT:	Standard reports, including casualty/injury/illness and medical utilization
MODEL LIMITATIONS:	• Intra-CONUS transportation and industrial base not simulated but represented through data inputs.
HARDWARE:	 Computer system: SUN 4.260, 486 DX PC Storage: To be determined Peripherals: 8mm tape drive, CD-ROM Network: PC-NFS for interface between SUN and PC
SOFTWARE:	 Watcom sql, c++ Special system requirements: Borland C++ libararies
DOCUMENTATION:	Software Requirements Specification, Functional Description, Object Oriented Requirements Document
VALIDATION & VERIFICATION	Review of design documents by /MACOM
TIME REQUIREMENTS:	To be determined
	I constitution to the second s

SECURITY CLASSIFICATION:	Source Code: Unclassified. Data: Secret.
FREQUENCY OF USE:	Not specified
PRINCIPAL USERS:	• CAA
MISCELLANEOUS:	This is not a true medical model, but provides output that might be of interest to medical planners. The information listed herein was taken directly from the Web site below, and may not be current.
KEYWORDS:	Mobilization, readiness, training, base support
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: AIR FORCE MEDICAL READINESS PLANNING FACTORS (MRPF)

NAME OF MODEL:	AIR FORCE MEDICAL READINESS I LAWANG I ACTORS (MICE I)
STATUS:	Development completed.
PROPONENT:	USAF Surgeon General Office
	Directorate, Medical Readiness Doctrine & Planning
DEVELOPER:	HQ USAF/SGXE (WAR-MED PSO)
POINT OF CONTACT:	• Col Sarah Wright, (301) 619-7503
PURPOSE:	• The purpose of the Air Force Medical Readiness Planning Factors (MRPF) tool is to provide medical planners and programmers with an analytical mechanism to evaluate requirements, capabilities and assessments of the United States Air Force Medical Treatment Facilities (MTF). This analysis tool is critical to the planning and decision making which affects wartime medical capabilities, assessments, and requirements. A medical planning factors tool is essential for Air Force medical planners and programmers to determine service support needs in future conflicts. This MRPF tool was developed to satisfy those needs.
GENERAL DESCRIPTION:	 The MRPF generates information based on a peak, ten day worse case scenario. Potential applications of this tool span the spectrum of planning and programming activities which support specific wartime medical missions.
FILE INPUT:	 Consists of a large database taken from the HQ USAF/SGXR Medical Readiness Support Database (MRSD), Defense Medical Standardization Board Deployable Medical Systems (DEPMEDS), USUHS Casualty Data Input for Air Base Medical System Modeling, HQ USAF/DPXC Threat Model, and HQ Air Mobility Command.
USER INPUT:	 Population At Risk Level of Care Combat Intensity Level Combat Intensity Period WIA and DNBI Rates Attack Data
OUTPUT:	 Patient Stream File Attack File Documentation File
MODEL LIMITATIONS:	 Battle Injury Casualties limited to those resulting from Air Delivered Conventional Weapons Casualty Streams limited to DEPMEDS PCs

HARDWARE:	IBM Compatible PC with 486 or better processor
HARD WARE.	• 90 Mhz
	Hard Disc/Swap Minimum Space 20 MB
	8 MB RAM
	VGA or Higher
	• Windows 95
	• 3.5" Floppy Drive
	Mouse
SOFTWARE:	MS Access and SQL
DOCUMENTATION:	MRPF Reference Manual, including User's Instructions
VALIDATION &	V&V Completed
VERIFICATION	
TIME REQUIREMENTS:	•
SECURITY	·
CLASSIFICATION:	
FREQUENCY OF USE:	·
PRINCIPAL USERS:	HQ USAF/SGXR, WAR-MED Planning Systems Office
MISCELLANEOUS:	
KEYWORDS:	
SOURCE OF	HQ USAF/SGXE (WAR-MED PSO)
INFORMATION:	

NAME OF MODEL:

MEDICAL READINESS SUPPORT DATABASE (MRSD)

PROPONENT: USAF Surgeon General's Office	NAME OF MODEL.	
DEVELOPER: Directorate, Medical Readiness Doctrine and Planning DEVELOPER: WAR-MED Planning Systems Office, HQ USAF/SGXR Col Sarah Wright, (301) 619-7503 Serves as a repository of AF Surgeon General medical readiness doctrine and clinical policy. Provides information for Standardized Medical Readiness Training System (SMRTS) at unit-level medical readiness training. Also, provides a variety of input files for simulation models. GENERAL DESCRIPTION: A system to provide easy access to view and modify any of the data used by war-med pso for activities relevant to policies, procedures, training, and simulation. The system consists of a database, application software, user interface, and several additional interfaces to allow easy transfer of information to and from MRSD. FILE INPUT: Air Force Table of Allowances information, certain fields from DEPMEDS database Files from the Network Editor Expert panel data USER INPUT: USER INPUT: USER INPUT: USER INPUT: Cuser interface will allow database administrator to change all MRSD data, including data related to ConOps, Mission Statements, Base Operating Support, Work Center Data Description (Task & Task description) for 72 Functional Account Codes, AFSC/task assignment lists, patient treatment networks, statistical modeling data. Cutput: Cutput: Creates a variety of standardized reports for use by subject matter expert panels for data review and update. Reports can also be customized. Extract to the Standardized Medical Readiness Training System Files to the Network Editor Extract to the Standardized Medical Readiness Training System Files to the Network Editor Extract to the simulation modeling database MODEL LIMITATIONS: Some user training is needed to interact with the database. MODEL LIMITATIONS: PowerBuilder 5.0, Sybase SQL Anywhere 5.0, multiuser version	STATUS:	
DEVELOPER: • WAR-MED Planning Systems Office, HQ USAF/SGXR POINT OF CONTACT: • Col Sarah Wright, (301) 619-7503 • Serves as a repository of AF Surgeon General medical readiness doctrine and clinical policy. Provides information for Standardized Medical Readiness Training System (SMRTS) at unit-level medical readiness training. Also, provides a variety of input files for simulation models. GENERAL DESCRIPTION: • A system to provide easy access to view and modify any of the data used by war-med pso for activities relevant to policies, procedures, training, and simulation. The system consists of a database, application software, user interface, and several additional interfaces to allow easy transfer of information to and from MRSD. FILE INPUT: • Air Force Table of Allowances information, certain fields from DEPMEDS database • Files from the Network Editor • Expert panel data USER INPUT: • Creates a variety of standardized reports for use by subject matter expert panels for data review and update. Reports can also be customized. • Extract to the Standardized Medical Readiness Training System • Files to the Network Editor • Extract to the Standardized Medical Readiness Training System • Files to the Network Editor • Extract to the simulation modeling database MODEL LIMITATIONS: • Some user training is needed to interact with the database. MODEL LIMITATIONS: • PowerBuilder 5.0, Sybase SQL Anywhere 5.0, multiuser version	PROPONENT:	
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readiness doctrine and clinical policy. Provides information for Standardized Medical Readiness Training System (SMRTS) at unit-level medical readiness training. Also, provides a variety of input files for simulation models. 4 System to provide easy access to view and modify any of the data used by war-med pso for activities relevant to policies, procedures, training, and simulation. The system consists of a database, application software, user interface, and several additional interfaces to allow easy transfer of information to and from MRSD. FILE INPUT: Air Force Table of Allowances information, certain fields from DEPMEDS database Files from the Network Editor Expert panel data USER INPUT: USER INPUT: USER INPUT: OUTPUT: Creates a variety of standardized to ConOps, Mission Statements, Base Operating Support, Work Center Data Description (Task & Task description) for 72 Functional Account Codes, AFSC/task assignment lists, patient treatment networks, statistical modeling data. OUTPUT: Creates a variety of standardized reports for use by subject matter expert panels for data review and update. Reports can also be customized. Extract to the Standardized Medical Readiness Training System Files to the Network Editor Extract to the Standardized Medical Readiness Training System Files to the Network Editor Extract to the simulation modeling database MODEL LIMITATIONS: MODEL LIMITATIONS: Windows NT, 80 MG RAM, 4-10 GB Fast SCSI Hard Drive, EISA Architecture, PCI Bus PowerBuilder 5.0, Sybase SQL Anywhere 5.0, multiuser version	POINT OF CONTACT:	
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HARDWARE: • Windows NT, 80 MG RAM, 4-10 GB Fast SCSI Hard Drive, EISA Architecture, PCI Bus • PowerBuilder 5.0, Sybase SQL Anywhere 5.0, multiuser version	OUTPUT:	 matter expert panels for data review and update. Reports can also be customized. Extract to the Standardized Medical Readiness Training System Files to the Network Editor Extract to the simulation modeling database
EISA Architecture, PCI Bus • PowerBuilder 5.0, Sybase SQL Anywhere 5.0, multiuser version	MODEL LIMITATIONS:	
version	HARDWARE:	EISA Architecture, PCI Bus
	SOFTWARE:	version
DOCUMENTATION: • MRSD Requirements and Design Specification	DOCUMENTATION:	MRSD Requirements and Design Specification

VALIDATION & VERIFICATION	In progress
TIME REQUIREMENTS:	Minimal
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	On demand.
PRINCIPAL USERS:	HQ USAF/SGXR WAR-MED PSOAir Force MAJCOMS
MISCELLANEOUS:	Fully integrated with Network Editor and UTC Validation Model (simulation).
KEYWORDS:	Database, War-Med, Air Force
SOURCE OF INFORMATION:	WAR-MED PSO, Fort Detrick, MD

NAME OF MODEL:

NAVAL HEALTH RESEARCH CENTER MARINE CORPS MEDICAL MATERIEL SUPPLY MODEL

STATUS:	 Operational. Medical tasks are defined, and supplies and equipment needed to perform those tasks have been identified for the following AMALs: Corpsman medical vest Battalion Aid Station Lab X-ray Operating Room Surgical Shock Trauma (SST) Ward
PROPONENT:	Marine Corps Combat Doctrine Development Center
DEVELOPER:	Code 22, Naval Health Research Center, San Diego, CA 92186-5122
POINT OF CONTACT:	• Dr. Paula Konoske, DSN 553-0730, COM (619) 553-0730; e-mail: Error! Bookmark not defined.
PURPOSE:	To model the far forward medical supply stream by linking specific clinical requirements to individual medical treatment items.
GENERAL DESCRIPTION:	This computer model produces medical consumable and equipment requirements for a given distribution of DEPMEDS patient conditions. The model produces an audit trail for each item in the Marine Corps supply system and provides a management tool for maintaining and updating supplies by linking the AMAL material with Marine Corps specific requirements.
FILE INPUT:	MRC East, MRC West, or user-defined
USER INPUT:	Medical facility and logistics parameters; other inputs to be determined
OUTPUT:	Marine Corps medical consumables and equipment
MODEL LIMITATIONS:	None specified.
HARDWARE:	 Computer: IBM-Compatible PC - 386 or higher. Storage: Minimum 25 MB disk space
SOFTWARE:	Windows 3.1 or higher

DOCUMENTATION: VALIDATION &	 Galarneau MR, Mahoney KJ, Konoske, PJ & Emens-Hesslink KE. Development of a model for predicting medical supply requirements at the forward echelons of care: preliminary findings for echelon II laboratory and x-ray ancillaries. Naval Health Research Center Report No. 97-3, San Diego CA. Galarneau MR, Konoske, PJ, Emens-Hesslink KE & Gauker ED. A model for predicting medical supply requirements at the forward areas of care: battalion aid stations. Naval Health Research Center Report No. 97-28, San Diego CA. Galarneau MR, Konoske, PJ, Emens-Hesslink KE & Pang G. Reducing the logistical footprint of forward resuscitative surgical units using a patient-driven model of clinical events. Naval Health Research Center Report No. 98-1, San Diego CA. Not specified
VERIFICATION TIME REQUIREMENTS:	 Program setup: approximately 8 hours. Program execution: approximately 30 minutes
SECURITY CLASSIFICATION:	Unclassified, but some databases may be classified.
FREQUENCY OF USE:	To be determined
PRINCIPAL USERS:	Marine Corps medical planners and logisticians
MISCELLANEOUS:	Additional efforts are underway to use this approach to examine existing AMALs/ADALs of shipboard medical departments.
KEYWORDS:	AMAL, medical supply modeling, medical resource planning, patient conditions (PCs)
SOURCE OF INFORMATION:	Naval Health Research Center

NAME OF MODEL: NETWORK EDIT

NAME OF MODEL:	NETWORK EDIT
STATUS:	Development completed
PROPONENT:	USAF Surgeon General Office
	Directorate, Medical Readiness Doctrine & Planning
DEVELOPER:	WAR-MED Planning Systems Office, HQ USAF/SGXR
POINT OF CONTACT:	• Col Sarah Wright, (301) 619-7503
PURPOSE:	Examine, validate, modify, and update patient condition sequential task networks for simulation in the UTC Validation Model.
GENERAL DESCRIPTION:	• The Network Editor includes the Network Editor Application and the Network Editor Interface to the Medical Readiness Support Database (MRSD). It will extract, format, and display a graphical view of the master network of tasks for each DEPMEDS Patient Condition (PC) and for each echelon of care, including the Air Transportable Hospital (ATH). It will also allow viewing of individual PC networks, including PC-specific data attached to the tasks. It will support modifications to the networks, which will be exported to MRSD and stored in a format that can be used for simulation in the UTC Validation Model
FILE INPUT:	 Files from MRSD are imported into the Network Editor. The files for the master network contain nodes representing tasks and logic and the links connecting the nodes. Files for the PC networks also include PC profiles with lists of active tasks and specifications of PC-specific task information.
USER INPUT:	Changes to nodes: task reference, sequence, or layout for viewing
OUTPUT:	Revised networks and PC profiles
MODEL LIMITATIONS:	There are some limitations on the type of data that can be entered from the Network Editor rather than the standard MRSD user interface for database changes
HARDWARE:	 PC with Pentium 133 Mhz, 17" Monitor 64 MB RAM 2 GB Hard drive, HP Plotter
SOFTWARE:	Windows 95 NetViz
DOCUMENTATION:	Simulation Requirements and Design Specification Report
VALIDATION & VERIFICATION	In progress
TIME REQUIREMENTS:	Minimal

SECURITY CLASSIFICATION: FREQUENCY OF USE: PRINCIPAL USERS:	 Unclassified, but some databases may be classified. On demand. HQ USAF/SGXR WAR-MED PSO and Air Force MAJCOMS
MISCELLANEOUS:	The Network Editor is intimately linked with two other models being developed and used by WAR-MED PSO: MRSD and the UTC Validation Model. Data files are extracted from MRSD for use in NetViz and stored there after changes are made. This ensures that the simulation will always reflect the most current network data. The master and PC networks are central to the UTC Validation Model, and the integrity of the networks is maintained through the Network Editor.
KEYWORDS:	War-med, Air Force, analysis, networks, nodes
SOURCE OF INFORMATION:	War-Med PSO, Fort Detrick, MD

NAME OF MODEL: OPTEVAC - THE OPTIMAL PLACEMENT OF CASUALTY EVACUATION ASSETS

STATUS:	Operational
PROPONENT:	Naval Medical Research & Development Command
DEVELOPER:	Naval Health Research Center, Operations Research Division
POINT OF CONTACT:	• Christopher Blood, DSN 553-8386, COM (619) 553-8386
PURPOSE:	The OPTEVAC model will provide medical planners with the required number and optimal placements of evacuation assets to ensure sufficient casualty transport while minimizing oversupply of ground and air ambulances.
GENERAL	The OPTEVAC planning tool consists of input screens which
DESCRIPTION:	employ graphical user interfaces prompting the user for the information needed for the simulations.
FILE INPUT:	The Probabilistic Location Set Covering Problem is the core module for a linear programming model which assists in the determination of evacuation assets determinations.
USER INPUT:	Theater, troop deployment nodes, types of evacuation assets available, and preferred locations of medical treatments facilities.
OUTPUT:	Tabular and graphic reports of requirements for ground and air ambulances as well as optimal positioning of those evacuation assets and ambulance exchange points.
MODEL LIMITATIONS:	not specified
HARDWARE:	To be determined
SOFTWARE:	Borland C++
DOCUMENTATION:	Naval Health Research Center Technical Report 97-7G
VALIDATION & VERIFICATION	To be determined
TIME REQUIREMENTS:	To be determined
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	To be determined
PRINCIPAL USERS:	To be determined
MISCELLANEOUS:	Evacuation assets, Casualty evacuation, Evacuation requirements
KEYWORDS:	Naval Health Research Center Technical Report 95-39, 97-7G.
SOURCE OF INFORMATION:	

NAME OF MODEL: ORCA (OPERATIONAL REQUIREMENTS-BASED CASUALTY ASSESSMENT SOFTWARE SYSTEM

STATUS:	Operational (Alpha+ model)
PROPONENT:	Joint Technical Coordinating Group/ Munitions Effectiveness & Aircraft Survivability (JTCG/ME&AS)
DEVELOPER:	JTCG/ME&AS Crew Casualty Working Group
POINT OF CONTACT:	David N. Neades, COM (410) 278-6335, DSN 298-6355, E-mail Error! Bookmark not defined.
PURPOSE:	To evaluate personnel casualties for all conventional insults (blast, burns, bullets, etc.), for any crew position (pilot, gunner, infantry, etc.), to support the analytical community consistent with the needs of the medical community.
GENERAL DESCRIPTION:	ORCA models personnel casualties by defining the component tasks required to perform an operational job and determining the effect of a given insult on individual capabilities as required for job performance.
FILE INPUT:	 ORCA uses a hierarchical database for job requirements: Job: MOS, NEC, AFSC, etc. Numbered Tasks Task Elements Databases and algorithms to model the physiological effects of insults and the relation between injury and individual capability
USER INPUT:	Insult, individual characterization, and task requirements for MOS, NEC, or AFSC
OUTPUT:	Graphical and tabular reports of operational casualty, individual capability, and injury summary
MODEL LIMITATIONS:	Model is deterministic.
HARDWARE:	UNIX operating system
SOFTWARE:	 Alpha+ version of ORCA currently available. No proprietary software required.
DOCUMENTATION:	User's Manual
VALIDATION & VERIFICATION	• In progress. Initial V&V is underway for FY96. Scheduled for completion in FY 98.
TIME REQUIREMENTS:	Minutes
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	Tri-Service vulnerability/lethality/survivability community
MISCELLANEOUS:	Available for testing. Completion scheduled FY98.

KEYWORDS:	Casualty assessment, survivability, crew casualty
SOURCE OF INFORMATION:	Dr. Terrence Klopcic

NAME OF MODEL: PATIENT WORKLOAD GENERATOR (PATGEN)

NAME OF MODEL:	PATIENT WORKLOAD GENERATOR (1711 GETY)
STATUS:	Operational
PROPONENT:	Assistant Commander for Force Integration, US Army
	Medical Department Center and School
DEVELOPER:	Assistant Commander for Force Integration, US Army
	Medical Department Center and School
POINT OF CONTACT:	US Army Medical Department Center and School
	Assistant Commander for Force Integration ATTN: MCCS-FF
	Chief, Force Structure and Analysis Branch
	Fort Sam Houston, TX 78234-6175
	Telephone: DSN: 471-1746/2985; COM (210) 1746/2985
PURPOSE:	The patient workload model generates a workload file of
	patient events to be used as input by other models. Summary
	statistical reports of patient movement through various
	echelons of the medical system are also produced.
GENERAL	This model was originally a subroutine in the CZAR Model,
DESCRIPTION:	which was developed to assess health care resource
	requirements in the combat zone and communications zone of a conventional theater. It is a stochastic model, which
	generates a workload of patients and summarizes their
	movement though various echelons of care until they leave
	the system. Patient movement, in the form of event notices, is
	a function of the stochastic variables and patient condition
	number. A statistical summary of the daily workload by
	patient condition is listed. The model has options to store
	other workload statistics in output files, which may be listed
	or used as input by other programs.
FILE INPUT:	• Incidence rates for disease and non-battle injury conditions,
FILE INFOI.	and probability of occurrence for wounded in action and battle
	fatigue conditions.
USER INPUT:	Troop strength of combat and support forces.
	Patient condition data such as treatment time and disposition
	category.
	Frequency of occurrence of categories by hour and day.
OUTPUT:	Patient workload file with records of patient movement and
	final disposition.
	Summary report of patient workloads by day and patient
	condition for each treatment echelon.
	Summary reports of daily and periodic patient workloads by
	treatment echelon.

MODEL LIMITATIONS:	Six treatment levels only.
	Period length - maximum of 30 days.
	Periods must have same length if they are to be aggregated.
	Maximum of 5 regions per period.
HARDWARE:	Computer: Dual 486/66 MHz Processor.
	Operating system: SCO UNIX.
	Disk space: 20 MB.
	Peripheral equipment: hard disk, printer.
SOFTWARE:	Programming language: FORTRAN
	User and programmer/analyst documentation is complete and
DOCUMENTATION:	contained in one manual. Includes:
	Introduction.
	File descriptions.
	Run instructions.
	Sample reports.
	• Flowcharts.
	Subroutine descriptions.
	• File printouts.
	Common block dictionary.
YAAY YD A TIYONI O	Assistant Commander for Force Integration, US Army
VALIDATION &	Medical Department Center and School
VERIFICATION	1 1 ' ' ' C
TIME REQUIREMENTS:	1 Communication in the state of
·	man-days analysis and evaluation.seconds run time
SECURITY	Unclassified.
CLASSIFICATION:	
FREQUENCY OF USE:	On demand.
PRINCIPAL USERS:	Assistant Commander for Force Integration, U. S. Army
TRINCH THE OSERS.	Medical Department Center and School
MISCELLANEOUS:	•
KEYWORDS:	Workload, Model, Health Care, Generator, Events, Patients,
KEI WORDS.	FORTRAN, Stochastic.
SOURCE OF	AMEDD Catalog of Computer Models
INFORMATION:	
INTORNATION.	

NAME OF MODEL: PATIENT FLOW MODEL (PFM)

NAME OF MODEL:	PATIENT FLOW MODEL (1 1 M)
STATUS:	Operational
PROPONENT:	Director, U.S. Army Concepts Analysis Agency
	ATTN: CSCA-SS, 8120 Woodmont
	Avenue, Bethesda, MD 20814-2797.
DEVELOPER:	US Army Concepts Analysis Agency
POINT OF CONTACT:	Stanley Miller
TORVI OF CONTERED	• COM (301) 295-5292; DSN 295-5292
PURPOSE:	• The Patient Flow Model is a computerized analytical tool which tracks hospitalized patients in a theater and the sustaining base. The flow of patients through two to four echelons can be simulated, with strengths admission rates, echelon skip policies, and dispersion factors. Forecasts of hospital bed requirements and patient evacuation requirements by echelon, plus the impact upon the CONUS hospitalization system of admissions evacuated from the theater are also evaluated. The model can be used to evaluate effects of changes in evacuation policy, changes or use of a skip policy, and sensitivity of any assumptions concerning input variables
GENERAL DESCRIPTION:	• The model is a one-sided deterministic, time-step, patient flow analyzer for theater level forces. The smallest group is usually a division, but other unique combat elements can be separately analyzed. Primary solution techniques involve probability distributions of patient accumulation and dispositions. An alternative version is available which computes the supportable evacuation policy for a given number of theater hospital beds.
FILE INPUT:	Wounded, disease and non-battle injury admission rates by region by time period
USER INPUT:	 Dispersion factors. Number of time periods. Length of periods. Number of echelons. Number of regions per echelon. Number of divisions. Evacuation and skip policies. Evacuation delay. Number of theater beds. Troop strengths by region by time period.

	Admission summary by echelon.
OUTPUT:	Patient flows and status at each time period in each echelon
	(bed requirements, evacuees, deaths, discharges, skipped
	1
	evacuees).
MODEL LIMITATIONS:	Maximum of 24 time periods.
	Total days not to exceed 360.
	Four echelons; eight regions each.
	Two-day minimum time period.
HARDWARE:	Computer: IBM compatible PC, 4MB RAM min.
	Operating system: M&S-DOS.
	Disk space: 700K.
	Peripheral equipment: hard disk, printer.
SOFTWARE:	Programming language: M&S-FORTRAN.
DOCUMENTATION:	Complete in one manual with narratives, flowchart, program
DOCUMENTATION.	listing, and input formats. Data base probability distributions
	are also included. User documentation is limited.
VALIDATION &	Not provided
VERIFICATION	
	• 2-5 seconds run time.
TIME REQUIREMENTS:	1 man-day to analyze and evaluate results.
	1 man-day to structure non-critical data in model input
	format.
	1 man-week learning time for users.
CECUPANA	Unclassified.
SECURITY	Onciassified.
CLASSIFICATION:	
FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	Office of the Surgeon General, Department of the Army.
	Concepts Analysis Agency.
	Directorate of Combat and Doctrine Development.
	US Army Medical Department Center and School.
MISCELLANEOUS:	Operates independently or in connection with other medical
	or nonmedical programs.
KEYWORDS:	Analytical, Model, Patient, Flow, Health Care,
	Computerized, Deterministic, Time Step, Medical,
	FORTRAN
SOURCE OF	AMEDD Catalog of Computer Models
INFORMATION:	
INFORMATION:	

NAME OF MODEL: SHIPCAS - SHIPBOARD CASUALTY PROJECTION SYSTEM

NAME OF MODEL.	
STATUS:	Operational
PROPONENT:	Naval Medical Research & Development Command
DEVELOPER:	Naval Health Research Center
POINT OF CONTACT:	• Christopher Blood, DSN 553-8386, COM (619) 553-8386
PURPOSE:	SHIPCAS provides medical planners with injury and illness estimates.
GENERAL DESCRIPTION:	Parameters of naval combat operations such as hit rates and battle intensity were statistically determined for both combatant and auxiliary ships under fire from several different weapon types. SHIPCAS incorporates these rates into a user-defined naval combat scenario to estimate resulting casualties.
FILE INPUT:	SHIPCAS file which incorporates data from 80 naval combat operations
USER INPUT:	 Ship selection - user specifies composition of task force. Combatant (destroyers, carriers, frigates, or cruisers) Auxiliary (cargo, minesweeper, motor torpedo, tank landing ship, or transports) Battle Intensity (none, light, moderate, high, or intense) and duration.
OUTPUT:	Hit distribution tables, casualty distribution tables, DNBI, WIA, and graphics
MODEL LIMITATIONS:	Not specified
HARDWARE:	 Computer: IBM or IBM-compatible PC Storage: 1 MB RAM, 2 MB free space on hard disk Peripherals: EGA, VGA, or SVGA monitor, serial mouse
SOFTWARE:	 DOS version 4.01 or higher Microsoft Windows 3.1 or higher
DOCUMENTATION:	Technical Document 94-6F, Naval Health Research Center
VALIDATION & VERIFICATION	Technical Document 97-3C, Naval Health Research Center
TIME REQUIREMENTS:	Not specified
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	Not specified
MISCELLANEOUS:	•
KEYWORDS:	Casualty estimate, Illness estimate, Injury estimate

SOURCE OF	•	Technical Document 97-3C, Naval Health Research Center
INFORMATION:		

NAME OF MODEL: SHIPDAM - SHIP DAMAGE MODEL

NAME OF MODEL.	
STATUS:	Operational
PROPONENT:	Wargaming Department, Naval War College
DEVELOPER:	John David Taylor Laboratory
POINT OF CONTACT:	Harry Gray, e-mail address: Error! Bookmark not defined.
PURPOSE:	SHIPDAM models ship damage caused by weapons hits. It is designed to support battle damage assessment in conjunction with larger war games or other micromodels.
GENERAL DESCRIPTION:	 Domain: Sea Span: Local Force composition: Individual ship, enemy antiship weapons Scope of conflict: Conventional antiship weapons
FILE INPUT:	Data sets for ship classes, developed by David Taylor
USER INPUT:	User defines target ship, type, and number of impacting weapons, and azimuth of weapon approach
OUTPUT:	Data files containing exact burst point location for each hit, status for ship components and systems, and hit-by-hit report
MODEL LIMITATIONS:	Can only be run for ship classes for which David Taylor Research Center has constructed data sets.
HARDWARE:	Computer: IBM-compatible PC with 512K RAM
SOFTWARE:	• C
DOCUMENTATION:	User's manual, source code
VALIDATION & VERIFICATION	not specified
TIME REQUIREMENTS:	Data Base: 10 minutesCPU time: 20 seconds
SECURITY CLASSIFICATION:	Unclassified, but databases are classified.
FREQUENCY OF USE:	Several times per year
PRINCIPAL USERS:	Wargaming Department, Naval War College
MISCELLANEOUS:	SHIPDAM is not a medical model, but provides output that might be of interest to medical planners.
KEYWORDS:	model, attrition, damage assessment
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL: STANDARDIZED MEDICAL READINESS SYSTEM (SMRTS)

NAME OF MODEL:	STANDARDIZED MEDICAL READINESS SYSTEM (SMRTS)
STATUS:	Development Completed.
PROPONENT:	USAF Surgeon General Office
	Directorate, Medical Readiness Doctrine and Planning
DEVELOPER:	WAR-MED Planning Systems Office, HQ USAF/SGXR
POINT OF CONTACT:	Col Sara Wright (301) 619-7503
PURPOSE:	To develop specialty specific and mission specific medical readiness training at unit level.
GENERAL DESCRIPTION:	An informational database of medical readiness training tasks for each Air Force AFSC. Information is queried by
	Functional Account Code (FAC) and by Echelon.
FILE INPUT:	Work Center Description Database
USER INPUT:	None
OUTPUT:	Series of reports to assist in creating training plans. FAC Echelon AFSC Specific Report, FAC Team Training Report, Mission-Concept of Operations Report, Echelon Specific Report, Echelon-AFSC Specific Report
MODEL LIMITATIONS:	• None
HARDWARE:	 Computer: 386 or higher Monitor: VGA or higher Minimum disk space: 20 Mbytes RAM: 8 MB
SOFTWARE:	WINDOWS 3.1 or higherPower Builder 5.0
DOCUMENTATION:	 Source code Users manual Technical/Specifications Document
VALIDATION & VERIFICATION	• TBA
TIME REQUIREMENTS:	• 5-10 minutes
SECURITY CLASSIFICATION:	Unclassified
FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	 HQ USAF/SGXR WAR-MED PSO Air Force MAJCOMS AF Active Duty, Reserve, and Guard facilities and units
MISCELLANEOUS:	 Operates independently, with a long-term objective of building connectivity to Defense Medical Human Resources System (DMHRS).

KEYWORDS:	War-Med, Air Force, model, FAC, AFSC, echelon
SOURCE OF INFORMATION:	USAF WAR-MED PSO, Fort Detrick, MD

NAME OF MODEL: THREAT RELATED ATTRITION (THREAT) SYSTEM

STATUS: PROPONENT:	 FOC 31 Oct 97. Software now in maintenance phase. HQ USAF DCS/Personnel, Air Force Contingency and Joint 	
PROPONENT:		
	Matters Division (HQ USAF/DPXC)	
	Matters Division (HQ USAF/DFAC)	
DEVELOPER:	• Maj Richard B. Berry, COM (703) 695-0735, DSN 225-0735	
POINT OF CONTACT:	Single Agency Manager, Air Force Pentagon Communications Agency, Air Staff Systems Directorate, Management Information Systems Division	
PURPOSE:	The THREAT system generates personnel attrition rate estimates based on wartime scenarios for use by air staff planners to support requirements of the War Mobililzation Plan (WMP-1) and the Joint Operational Planning and Execution System (JOPES).	
GENERAL DESCRIPTION:	 THREAT is a software system composed of three Computer Software Configuration Items (CSCIs); the Executive, the Casualty Generation Model (CGM), and the Facility Model. The Executive CSCI controls all user input to the THREAT system, allows execution of the FM and CGM models, and allows viewing of results of model executions. The FM provides casualty estimates of one weapon against one structure type. The CGM CSCI produces casualty estimates for an entire installation and combines installation estimates for an entire theater. Weapons used include conventional, nuclear, chemical, biological, and SOF forces. 	
FILE INPUT:	 Structure Data Weapon Data Weapon Effect Data Disease Non-battle Injury (DNBI) Data 	

	Scenario Data	
USER INPUT:	Administrative Loss Rates	
	Administrative Loss Rates Air War Loss Rates	
	Di Aidan Description	
	Blue Sortie Type Descriptions Blue Air Missions Plan Air Missions	
	Blue Air Missions Builting Burnsteiner	
	Building Populations	
	Personnel Categories	
	Personnel Placement Rules	
	Red Airbase Descriptions	
	Red Sortie Type Descriptions	
	Stick Type Descriptions	
	Time Phased Force deployment Data	
	DNBI Wartime Multipliers Override Data	
OUTPUT:	Battle Injury Attrition	
	Air Mission Attrition	
	DNBI Attrition	
	Combat Stress Attrition	
	Daily Attrition rates by Theater	
	Daily Attrition Rates by Occupational Group	
	Attack Casualties by Airbase and Day	
	Facility Model Detailed Report	
	Facility Model Summary Report	
MODEL LIMITATIONS:	Provides only Attrition Data	
	Limited to USAF Structure Types	
	Requires Qualified Operations Analyst	
HARDWARE:	Sun Sparc 5 Computer System	
	Internal Disk Drive : 2 MB	
	Internal Floppy Drive: Capable of running X windows	
	• Color Workstation: Compatible with the Sun Sparc 5	
	Key Board : Compatible with the Sun Sparc 5	
	Desktop Sun CD Pack: 644 MB	
	Desktop Backup Pack: 5 Gigabyte; 8mm Tape	
	Printer: Post Script level 2 Compatible	
	Digitizer: GTCO Corporation Roll-UPII	
SOFTWARE:	Solaris 2.3: Operating System for Sun Sparc 5	
	Sybase SQL server 10.0.2: THREAT database management	
	system	
	Sybase Open Client C 10.0.2	
	Sybase Open Client Ada 10.0.2	
	Sybase Open Client Server 10.0.2	
	• Minor Utilities: Unix ® shell scripts, SciLab*, and SQL	
	scripts will be used for initialization of test data and	
	verification of test results.	

	The state of the s
DOCUMENTATION:	THREAT System Facility Model Technical Reference
D 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Manual
	THREAT System Casualty Generation Model Technical
	Reference Manual
	THREAT System Facility Model Computer Software
	Configuration Item (CSCI) Software Product Specification
	THREAT System, Casualty Generation Model CSCI
	Software Product Specification
	THREAT System Executive CSCI Software Product
	Specification
	THREAT System Interface Design Document
	THREAT System Software User's Manual
TALL AD A DECOME OF	Verification testing of the IOC version has been successfully
VALIDATION &	completed. A significant amount of Validation testing of the
VERIFICATION	IOC version has been accomplished but not fully completed.
	As required
TIME REQUIREMENTS:	
SECURITY	Unclassified, but some databases may be classified. Unclassified
CLASSIFICATION:	• THREAT contains technical data whose export is restricted
	by the Arms Control Act (Title 22, U.S.C. Sec 2751, et. seq.)
	or the Export Administration Act of 1979, as amended, Title
	50, U.S.C., App. 2401, et. seq.
FREQUENCY OF USE:	On demand
PRINCIPAL USERS:	HQ USAF/DPXC
MISCELLANEOUS:	Written in Ada for the most part. Uses C+ for some code.
KEYWORDS:	Personnel Attrition, Casualties, Modeling, Operations
	Analysis, Personnel Planning
SOURCE OF	AF/DPXC
INFORMATION:	SAM/GADB
IN ORMATION.	SAM/GADC

NAME OF MODEL: TRANSMO - TRANSPORTATION MODEL

NAME OF MODEL:	TRANSMO - TRANSPORTATION MODEL
STATUS:	Operational
PROPONENT:	US Army Concepts Analysis Agency
DEVELOPER:	US Army Concepts Analysis Agency
POINT OF CONTACT:	• John W. Warren, DSN 295-1690, COM (301)295-1690
PURPOSE:	• TRANSMO is used primarily to analyze strategic deployment issues taken in the context of the Defense Guidance Illustrative Planning Scenario. It specifically simulates the loading of cargo on intertheater lift vehicles, ultimately resulting in an arrival sequence of cargo in the theater of operation.
GENERAL DESCRIPTION:	 Domain: Deployment, redeployment, sea, air Span: Accommodates any theater depending on database input. Mission area: Mobility Level of detail: Processes on an hourly basis for aircraft and a daily basis for sealift. Lift assets are represented by their speed and capacities.
FILE INPUT:	Major Regional Contingency (MRC) East, MRC West, Nearly-simultaneous (NS) East-West, and NS West-East. Humanitarian assistance, peace enforcement, peacekeeping, and lesser regional contingency databases representing Army requirements.
USER INPUT:	Scenario data, including lift asset factors, distances between ports
OUTPUT:	Printouts of movement requirements, attrition associated with each requirement, and arrival time at the POD.
MODEL LIMITATIONS:	Does not track specific commodities and individual lift assets.
HARDWARE:	 Computer system: UNIX workstation Storage: 80,000 blocks (40 MB) for the model only
SOFTWARE:	Fortran
DOCUMENTATION:	User's Manual
VALIDATION & VERIFICATION	 Strategic Mobility System Assessment Study, Sept. 1986, CAA-SR-86-25, USACAA Strategic Deployment Analysis Review Study, Dec. 1991, CAA-SR-91-13, USACAA
TIME REQUIREMENTS:	 1 week to prepare full scenario 20 minutes CPU time 2-3 hours to analyze typical run

SECURITY CLASSIFICATION:	 Source code: Unclassified Data: Secret Documentation: Unclassified
FREQUENCY OF USE:	Not specified
PRINCIPAL USERS:	US Army Concepts Analysis Agency
MISCELLANEOUS:	This is not a true medical model, but provides output that might be of interest to medical planners. The information listed herein was taken directly from the Web site below, and may not be current.
KEYWORDS:	Simulation, attrition, scenario
SOURCE OF INFORMATION:	Error! Bookmark not defined.

NAME OF MODEL:

UTC (UNIT TYPE CODE) VALIDATION MODEL

CT ATTIC.	Development completed
STATUS:	77G + F.G
PROPONENT:	 USAF Surgeon General Office Directorate, Medical Readiness Doctrine & Planning
DEVELOPER:	 WAR-MED Planning Systems Office, HQ USAF/SGXR
POINT OF CONTACT:	• Col Sarah Wright, (301) 619-7503
PURPOSE:	• A family of simulation models for Air Force Unit Type Codes (UTC). Models validate UTC's, help determine correct number and skill mix of personnel, and sufficient amounts of critical medical equipment to treat user selected casualty streams. Allows analysis of AFSC utilization, bed utilization, length of waiting time, queues, and patient dispositions i.e. return to duty, died of wound, evacuated, and AE requirements.
GENERAL DESCRIPTION:	 The UTC Validation Model simulates hospital layout, flow of staff and patients through the hospital, patient tasks as determined by patient condition and dynamic conditions within the hospital, and staff and equipment utilization. It uses established task performance times and incorporates logic regarding alternative routings when preferred routings are not available, time on wards prior to evacuation or return to duty, timing of patient deaths, treatment priorities, surgery scheduling, group ward tasks, and selection of treatment providers. The user interface to the simulation is provided through a preprocessor unit, which extracts baseline data from the Medical Readiness Support Database (MRSD) and operates on the data to make it suitable for use in the simulation. Through the interface, the analyst can enter data to control the simulation, such as hospital configuration, staffing requirements, and equipment availability. Data from other sources, such as input casualty streams, also are read into the preprocessor and transformed for use in the simulation. The preprocessor maintains a history of runs and associated versions of the data.
FILE INPUT:	 An extract from MRSD is imported into the preprocessor; the extract includes information on WCD tasks (equipment, task times, and AF specialty codes), patient conditions (active tasks and task parameters), and master network Casualty streams are imported into the preprocessor Flat files from the preprocessor are imported into the simulation

	UTC configuration, staffing, equipment, and casualty stream
USER INPUT:	(through the preprocessor interface)
OUTPUT:	 Statistics reporting on input from the preprocessor (conditions and categories of casualties entering the ATH, staffing, configuration) Statistics reporting on output from the simulation (resource, equipment, and bed utilization; patient outcomes)
MODEL LIMITATIONS:	 Currently limited to 30 days and 1,500 patients Requires trained analyst to select input parameters and interpret results (entering information and conducting the simulation is not a limitation)
HARDWARE:	Minimum: PC with Pentium 133 MHz, 64 MB RAM, 2 GB Hard drive
SOFTWARE:	Windows 95, MedModel Version 3.2
DOCUMENTATION:	Simulation UncertainRequirements and Design Specification Report
VALIDATION & VERIFICATION	In progressUnclassified, but some databases may be classified.
TIME REQUIREMENTS:	On demand.
SECURITY CLASSIFICATION:	HQ USAF/SGXR WAR-MED PSOAir Force MAJCOMS
FREQUENCY OF USE:	• The UTC Validation Model is intimately linked with two other models being developed and used by WAR-MED PSO: MRSD and the Network Editor. The data link to MRSD ensures that the simulation can be run to reflect the most current task and patient data. The connection with the Network Editor is that the master and PC networks are central to defining a patient's path through the ATH, and the integrity of those networks is maintained through the Editor.
PRINCIPAL USERS:	War-Med, Air Force, model, treatment, networks, planning, scenario, simulation, staffing
MISCELLANEOUS:	WAR-MED PSO, Fort Detrick, MD
KEYWORDS:	
SOURCE OF INFORMATION:	

NAME OF MODEL: VIC - VECTOR IN COMMANDER

1111112 01 1110		
STATUS:	Operational since 1985	

	US Army TRADOC Analysis Center, ATTN.: ATRC-FM,	
PROPONENT:	Fort Leavenworth KS 66027	
	US Army TRADOC Analysis Center	
DEVELOPER:		
POINT OF CONTACT:	Mr. Dick Calkins, DSN 552-9255, COM (913) 684-9255	
	E-mail: Error! Bookmark not defined. The state of the state	
	Web Site: Error! Bookmark not defined. CTR A DOC stondard.	
PURPOSE:	VIC's primary role is the development of TRADOC standard	
	low-resolution scenarios and the conduct of combined arms	
	analysis on doctrine, force structure, operational concepts, and	
	COEA/AOA's. The outcome of force interactions is	
	determined in terms of the ground gained or lost, the attrition	
	of personnel and weapon systems, CSS/CS ability to support	
	the battle, and C4ISR collection and dissemination	
	capabilities.	
GENERAL	Domain: Land, air, space (overhead to land)	
DESCRIPTION:	Two sided, deterministic, discreet event simulation	
	Joint operations as they relate to supporting the maneuver	
	battle	
	 Span: Accommodates any theater depending on data base Mission areas: All conventional missions to include NBC. 	
	Level of detail: Maneuver units at the company or battalion Level and represent alements at the bettery squad and	
•	level and support elements at the battery, squad, and	
	 individual platform level. Available Databases/scenarios: Europe, SWA, NEA 	
FILE INPUT:	 Available Databases/scenarios: Europe, SWA, NEA Basic weapons performance data, other system performance 	
	data, tactical decision rules	
	D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
USER INPUT:	• Forces and supply inventories, geographic and terrain data, intelligence characteristics and capabilities, lines of	
	communication, engineer capabilities, and air and air defense	
	capabilities	
OVERNIE	Casualties and systems losses, FLOT traces and force	
OUTPUT:	positions over time, target acquisition and intelligence	
	summaries, availability and condition of forces and supplies,	
	and air battle and air defense results, situation reports, and	
	command and control decisions made.	
	All functional & operational output is saved as comma-	
	delimited flat files for use by standard relational database	
	software products.	
MODEL LIMITATIONS:	not specified	
MODEL LIMITATIONS.	<u> </u>	

HARDWARE:	 Computer system: SUN, HP, Silicon Graphics Memory: 128+ mb RAM Storage: Minimum 500 mb required. Network requirements: Aggregate Level Simulation Protocol (ALSP) for DIS applications as required.
SOFTWARE:	SIM&SCRIPT
DOCUMENTATION:	 Executive Summary, User Manual, Programmer Manual, Data Input Guide, Methodology Descriptions
VALIDATION & VERIFICATION	 Study proponent validates and certifies VIC's use for their specific application using detailed reviews "peelbacks" by schools and centers in conjunction with TRAC.
TIME REQUIREMENTS:	1 to 3 months to prepare database depending on data availability and scenario.
SECURITY CLASSIFICATION:	 Source code and documentation: Unclassified. Databases are often classified.
FREQUENCY OF USE:	As the Army's principle Corps-level simulation for force-on- force analysis, VIC is in constant use.
PRINCIPAL USERS:	 Available to DOD agencies by written request. TRAC, OSD-PA&E, MCCDC, TRADOC Schools & Centers, various Contractors
MISCELLANEOUS:	• GAYGD
KEYWORDS:	• simulation, model, analysis, force-on-force, C4ISR
SOURCE OF INFORMATION:	Web Site: Error! Bookmark not defined.

Appendix B